



City of Beloit

Travel Request & Expense Report

Travel Request - Part I

Employee(s) _____ Department _____

Request Date _____ Travel Date(s) _____

Travel Event _____

Method of Travel

- City Vehicle
 Private Vehicle
 Other

Approval:

Dept. Head _____

City Admin. _____

Date: _____

Expense Report - Part II

Lodging:

_____ days @ _____ per day

Reservations - Credit Card No. _____

Transportation :

_____ miles @ _____ per mile

Fees: (Registration, Dues, etc. - attach copy)

- Mail with registration \$ _____
 Due upon arrival \$ _____

Meals: Number of Meals Amount

Breakfast _____ @ \$ _____

Lunch _____ @ \$ _____

Dinner _____ @ \$ _____

Total Amount \$ _____

Miscellaneous Expenses:

Tolls \$ _____ Phone \$ _____

Taxi \$ _____ Other \$ _____

Total Amount \$ _____

Total Employee Reimbursement Due: \$ _____ (all receipts must be attached for reimbursement)

Any expense in excess of the City's travel policies regarding Per Diem shall be paid by the employee.

I hereby certify that this a true and accurate statement of actual expense incurred in accordance with the travel authorization. I understand the city will only pay reasonable and necessary expenses and will not pay for alcoholic beverages or extravagant charges unrelated to the purpose of the travel.

Requested by _____ Date _____

Dept. Head _____ City Admin. _____