

Employee Name _____

A _____

| MO. | DAY | TIME OF | | LOCATION | | PRIVATE AUTO MILEAGE | TOLLS AND/OR PARKING | LODGING | SUBSISTENCE | | TOTALS |
|---|-----|-----------|--------|--|----|--|----------------------|---------|-------------|---|--------|
| | | DEPARTURE | RETURN | | | | | | B | L | |
| | | | | From | To | | | | B | | |
| PURPOSE : | | | | | | | | | L | | |
| | | | | From | To | | | | D | | |
| | | | | From | To | | | | B | | |
| PURPOSE : | | | | | | | | | L | | |
| | | | | From | To | | | | D | | |
| | | | | From | To | | | | B | | |
| PURPOSE : | | | | | | | | | L | | |
| | | | | From | To | | | | D | | |
| | | | | From | To | | | | B | | |
| PURPOSE : | | | | | | | | | L | | |
| | | | | From | To | | | | D | | |
| | | | | From | To | | | | B | | |
| PURPOSE : | | | | | | | | | L | | |
| | | | | From | To | | | | D | | |
| | | | | From | To | | | | B | | |
| PURPOSE : | | | | | | | | | L | | |
| | | | | From | To | | | | D | | |
| | | | | From | To | | | | B | | |
| PURPOSE : | | | | | | | | | L | | |
| | | | | From | To | | | | D | | |
| If mileage claimed, was State car available? | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | TOTALS FOR THIS PAGE | | | | | |
| ENTER MILEAGE FROM ALL PAGES _____ (Miles) X _____ (Cents Per Mile) | | | | | | | | | | | |
| Additional Information (If necessary) | | | | | | OTHER EXPENSES (From Other Expense Page) | | | | | |
| | | | | | | TOTALS FROM ALL CONTINUATION PAGES | | | | | |
| | | | | | | GRAND TOTAL | | | | | |

Employee Name _____

A _____

| DATE Month Day | ITEM OF EXPENSE <i>(Attach receipt for each item over \$10)</i> | EXPLANATION | AMOUNT |
|---|---|--------------------|-------------------|
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| For instructions read Finance and Administration regulation 200 KAR Chapter 2. The form must be typed or legibly prepared in ink. Show times as a.m. or p.m. Show vicinity travel on a separate line for each day. Under subsistence, B=breakfast, L=lunch, D=dinner. Use continuation pages if needed. | | | PAGE TOTAL |

CONTINUATION PAGE

Employee Name _____

A _____

| MO. | DAY | TIME OF | | LOCATION | | PRIVATE AUTO MILEAGE | TOLLS AND/OR PARKING | LODGING | SUBSISTENCE | | TOTALS |
|-----------|-----|-----------|--------|----------|----|----------------------------|----------------------------|---------|-------------|---|--------|
| | | DEPARTURE | RETURN | | | | | | B | L | |
| | | | | From | To | | | | B | | |
| PURPOSE : | | | | | | | | | L | | |
| PURPOSE : | | | | | | | | | D | | |
| | | | | From | To | | | | B | | |
| PURPOSE : | | | | | | | | | L | | |
| PURPOSE : | | | | | | | | | D | | |
| | | | | From | To | | | | B | | |
| PURPOSE : | | | | | | | | | L | | |
| PURPOSE : | | | | | | | | | D | | |
| | | | | From | To | | | | B | | |
| PURPOSE : | | | | | | | | | L | | |
| PURPOSE : | | | | | | | | | D | | |
| | | | | From | To | | | | B | | |
| PURPOSE : | | | | | | | | | L | | |
| PURPOSE : | | | | | | | | | D | | |
| | | | | From | To | | | | B | | |
| PURPOSE : | | | | | | | | | L | | |
| PURPOSE : | | | | | | | | | D | | |
| | | | | From | To | | | | B | | |
| PURPOSE : | | | | | | | | | L | | |
| PURPOSE : | | | | | | | | | D | | |
| | | | | | | TOTALS FOR THIS PAGE | | | | | |