

Employee Name: \_\_\_\_\_  
Date of Training/Travel: \_\_\_\_\_  
Destination: \_\_\_\_\_

**Meals (no Alcohol, up to 15% tip, maximum amount up to Per Diem  
at General Services Administration's (GSA) website)**

Breakfast \_\_\_\_\_  
Lunch \_\_\_\_\_  
Dinner \_\_\_\_\_

**Lodging** \_\_\_\_\_

**Travel**

Taxi/Shuttle/Subway \_\_\_\_\_  
Parking \_\_\_\_\_  
Mileage \_\_\_\_\_  
Baggage Fees \_\_\_\_\_  
Tolls \_\_\_\_\_  
Gas \_\_\_\_\_  
  
Other \_\_\_\_\_

**Grand Total** \_\_\_\_\_