

**NC DEPARTMENT OF ADMINISTRATION - EMPLOYEE
REIMBURSEMENT OF TRAVEL AND OTHER EXPENSES INCURRED
IN THE DISCHARGE OF OFFICIAL DUTY BDA#**

INSTRUCTIONS TO CLAIMANT. Submit one original to Accounting. Attach all necessary receipts and other supporting documents to this form. Retain one (1) copy for your records. Please complete amount, company, account and center fields. Must be filed at least monthly and not later than 30 days after month ends. Must be prepared in ink or typed. All claims for non-travel expense reimbursement must be emergency use only and must be justified in a supporting document.

Check if address is new

Payee's Name (First, Middle Initial, Last)	Division/Section	Beacon ID #
Payee's Address (Street)	Title	Headquarters (City)
(City, State, Zip)	Period Covered by this Request (from/to)	

Under the penalties of perjury I certify this is a true and accurate statement of the city of lodging, expenses and allowances incurred in the service of the State. I have examined this reimbursement request and certify that it is just and reasonable.

(Claimant) (Date) (Supervisor) (Date)

*NOTE: ORIGINAL SIGNATURE AND DATES ARE REQUIRED FOR PROCESSING

Accounting Office Use Only			
Pay Entity	<input type="text"/>	Control #	<input type="text"/>
Expense Voucher No.	<input type="text"/>		
Payment Due Date	<input type="text"/>	< OR > Terms Code	<input type="text"/> N <input type="text"/> E <input type="text"/> T
REMIT MESSAGE: (Write check disposition instructions on line)			

Line No.	AMOUNT	Company	Account	Center	ACCRUAL CODE
0001	0.00		532711 Trans. In-State Air		
0002	0.00		532712 Trans. Out-of-State Air		
0003	0.00		532714 Trans. In-State Ground		
0004	0.00		532715 Trans. Out-of-State Ground		
0005	0.00		532721 Lodging In-State		
0006	0.00		532722 Lodging Out-of-State		
0007	0.00		532724 Meals-in-State		
0008	0.00		532725 Meals Out-of-State		
0009	0.00		532717 Other Trans. In State		
0010	0.00		532718 Other Trans Out of State		
0011	0.00		532930 Registration Fees		
0012	0.00		532727 Parking, Tips, Etc		

Total Expense 0.00
Less Advance _____
Tot. Due(Owe) 0.00

Approved as to proper travel chargeable to above accounting code verified as conforming to authorized reimbursable expenses.

AP Accountant _____

Travel (show each city visited)				Transportation		Subsistence		Misc. Expenses		
Day 1	From	To	1	In-State	Out-of-State	2	In-State	Out-of-State	Explanation	Amount
			G			B			Registration	
			A			L			Parking	
			O			D				
Depart		Arrive				H				
	I/S @ .33	I/S @ .545		O/S @ .33	O/S @ .545	P	0.000	0.000	T	0.00 0.00 0.00
Purpose										
Day 2	From	To	1	In-State	Out-of-State	2	In-State	Out-of-State	Explanation	Amount
			G			B			Registration	
			A			L			Parking	
			O			D				
Depart		Arrive				H				
	I/S @ .33	I/S @ .545		O/S @ .33	O/S @ .545	P	0.000	0.000	T	0.00 0.00 0.00
Purpose										
Day 3	From	To	1	In-State	Out-of-State	2	In-State	Out-of-State	Explanation	Amount
			G			B			Registration	
			A			L			Parking	
			O			D				
Depart		Arrive				H				
	I/S @ .33	I/S @ .545		O/S @ .33	O/S @ .545	P	0.000	0.000	T	0.00 0.00 0.00
Purpose										
Sub-Total				0.00	0.00	0.00	0.00	0.00		0.00

(1) Mode of Travel:

P - Private Car
A - Air
G - Ground, rail, bus, taxi, parking fees
O - Other

(2) Type of Subsistence:

B - Breakfast
L - Lunch
D - Dinner
H - Housing (Room)

NOTE: Daily total for subsistence not to exceed authorized amount for in-state or out-of-state travel.

Travel (show each city visited)						Transportation		Subsistence		Misc. Expenses	
Day 4	From	To	1	In-State	Out-of-State	2	In-State	Out-of-State	Explanation	Amount	
			G			B			Registration		
			A			L			Parking		
			O			D					
Depart			Arrive			H					
	I/S @.33	I/S @.545	O/S @ .33	O/S @ .545	P	0.000	0.000	0.00	0.00	0.00	
Purpose											
Day 5	From	To	1	In-State	Out-of-State	2	In-State	Out-of-State	Explanation	Amount	
			G			B			Registration		
			A			L			Parking		
			O			D					
Depart			Arrive			H					
	I/S @.33	I/S @.545	O/S @ .33	O/S @ .545	P	0.000	0.000	0.00	0.00	0.00	
Purpose											
Day 6	From	To	1	In-State	Out-of-State	2	In-State	Out-of-State	Explanation	Amount	
			G			B			Registration		
			A			L			Parking		
			O			D					
Depart			Arrive			H					
	I/S @.33	I/S @.545	O/S @ .33	O/S @ .545	P	0.000	0.000	0.00	0.00	0.00	
Purpose											
Day 7	From	To	1	In-State	Out-of-State	2	In-State	Out-of-State	Explanation	Amount	
			G			B			Registration		
			A			L			Parking		
			O			D					
Depart			Arrive			H					
	I/S @.33	I/S @.545	O/S @ .33	O/S @ .545	P	0.000	0.000	0.00	0.00	0.00	
Purpose											
Day 8	From	To	1	In-State	Out-of-State	2	In-State	Out-of-State	Explanation	Amount	
			G			B			Registration		
			A			L			Parking		
			O			D					
Depart			Arrive			H					
	I/S @.33	I/S @.545	O/S @ .33	O/S @ .545	P	0.000	0.000	0.00	0.00	0.00	
Purpose											
Day 9	From	To	1	In-State	Out-of-State	2	In-State	Out-of-State	Explanation	Amount	
			G			B			Registration		
			A			L			Parking		
			O			D					
Depart			Arrive			H					
	I/S @.33	I/S @.545	O/S @ .33	O/S @ .545	P	0.000	0.000	0.00	0.00	0.00	
Purpose											
Day 10	From	To	1	In-State	Out-of-State	2	In-State	Out-of-State	Explanation	Amount	
			G			B			Registration		
			A			L			Parking		
			O			D					
Depart			Arrive			H					
	I/S @.33	I/S @.545	O/S @ .33	O/S @ .545	P	0.000	0.000	0.00	0.00	0.00	
Purpose											
Day 11	From	To	1	In-State	Out-of-State	2	In-State	Out-of-State	Explanation	Amount	
			G			B			Registration		
			A			L			Parking		
			O			D					
Depart			Arrive			H					
	I/S @.33	I/S @.545	O/S @ .33	O/S @ .545	P	0.000	0.000	0.00	0.00	0.00	
Purpose											
Day 12	From	To	1	In-State	Out-of-State	2	In-State	Out-of-State	Explanation	Amount	
			G			B			Registration		
			A			L			Parking		
			O			D					
Depart			Arrive			H					
	I/S @.33	I/S @.545	O/S @ .33	O/S @ .545	P	0.000	0.000	0.00	0.00	0.00	
Purpose											
Sub-Total						0.00	0.00	0.00	0.00	0.00	

(1) Mode of Travel:
P - Private Car

G - Ground, rail, bus, taxi, parking fees

(2) Type of Subsistence:
B - Breakfast D - Dinner

NOTE: Daily total for subsistence not to exceed authorized amount for in-state or out-of-state travel.

Travel (show each city visited)						Transportation		Subsistence		Misc. Expenses	
Day	From	To	1	In-State	Out-of-State	2	In-State	Out-of-State	Explanation	Amount	
Day 13			G			B			Registration		
			A			L			Parking		
			O			D					
Depart		Arrive				H					
	I/S @.33	I/S @.545	O/S @ .33	O/S @ .545	P	0.000	0.000	T	0.00	0.00	
Purpose											
Day 14			G			B			Registration		
			A			L			Parking		
			O			D					
Depart		Arrive				H					
	I/S @.33	I/S @.545	O/S @ .33	O/S @ .545	P	0.000	0.000	T	0.00	0.00	
Purpose											
Day 15			G			B			Registration		
			A			L			Parking		
			O			D					
Depart		Arrive				H					
	I/S @.33	I/S @.545	O/S @ .33	O/S @ .545	P	0.000	0.000	T	0.00	0.00	
Purpose											
Day 16			G			B			Registration		
			A			L			Parking		
			O			D					
Depart		Arrive				H					
	I/S @.33	I/S @.545	O/S @ .33	O/S @ .545	P	0.000	0.000	T	0.00	0.00	
Purpose											
Day 17			G			B			Registration		
			A			L			Parking		
			O			D					
Depart		Arrive				H					
	I/S @.33	I/S @.545	O/S @ .33	O/S @ .545	P	0.000	0.000	T	0.00	0.00	
Purpose											
Day 18			G			B			Registration		
			A			L			Parking		
			O			D					
Depart		Arrive				H					
	I/S @.33	I/S @.545	O/S @ .33	O/S @ .545	P	0.000	0.000	T	0.00	0.00	
Purpose											
Day 19			G			B			Registration		
			A			L			Parking		
			O			D					
Depart		Arrive				H					
	I/S @.33	I/S @.545	O/S @ .33	O/S @ .545	P	0.000	0.000	T	0.00	0.00	
Purpose											
Day 20			G			B			Registration		
			A			L			Parking		
			O			D					
Depart		Arrive				H					
	I/S @.33	I/S @.545	O/S @ .33	O/S @ .545	P	0.000	0.000	T	0.00	0.00	
Purpose											
Day 21			G			B			Registration		
			A			L			Parking		
			O			D					
Depart		Arrive				H					
	I/S @.33	I/S @.545	O/S @ .33	O/S @ .545	P	0.000	0.000	T	0.00	0.00	
Purpose											
Sub-Total						0.00	0.00	0.00	0.00	0.00	

(1) Mode of Travel:
P - Private Car

G - Ground, rail, bus, taxi, parking fees

(2) Type of Subsistence:
B - Breakfast
D - Dinner

NOTE: Daily total for subsistence not to exceed authorized amount for in-state or out-of-state travel.

Travel (show each city visited)						Transportation		Subsistence		Misc. Expenses	
Day	From	To	1	In-State	Out-of-State	2	In-State	Out-of-State	Explanation	Amount	
Day 22			G			B			Registration		
			A			L			Parking		
			O			D					
Depart		Arrive				H					
	I/S @ .33	I/S @ .545	O/S @ .33	O/S @ .545	P	0.000	0.000	T	0.00	0.00	
Purpose											
Day 23			G			B			Registration		
			A			L			Parking		
			O			D					
Depart		Arrive				H					
	I/S @ .33	I/S @ .545	O/S @ .33	O/S @ .545	P	0.000	0.000	T	0.00	0.00	
Purpose											
Day 24			G			B			Registration		
			A			L			Parking		
			O			D					
Depart		Arrive				H					
	I/S @ .33	I/S @ .545	O/S @ .33	O/S @ .545	P	0.000	0.000	T	0.00	0.00	
Purpose											
Day 25			G			B			Registration		
			A			L			Parking		
			O			D					
Depart		Arrive				H					
	I/S @ .33	I/S @ .545	O/S @ .33	O/S @ .545	P	0.000	0.000	T	0.00	0.00	
Purpose											
Day 26			G			B			Registration		
			A			L			Parking		
			O			D					
Depart		Arrive				H					
	I/S @ .33	I/S @ .545	O/S @ .33	O/S @ .545	P	0.000	0.000	T	0.00	0.00	
Purpose											
Day 27			G			B			Registration		
			A			L			Parking		
			O			D					
Depart		Arrive				H					
	I/S @ .33	I/S @ .545	O/S @ .33	O/S @ .545	P	0.000	0.000	T	0.00	0.00	
Purpose											
Day 28			G			B			Registration		
			A			L			Parking		
			O			D					
Depart		Arrive				H					
	I/S @ .33	I/S @ .545	O/S @ .33	O/S @ .545	P	0.000	0.000	T	0.00	0.00	
Purpose											
Day 29			G			B			Registration		
			A			L			Parking		
			O			D					
Depart		Arrive				H					
	I/S @ .33	I/S @ .545	O/S @ .33	O/S @ .545	P	0.000	0.000	T	0.00	0.00	
Purpose											
Day 30			G			B			Registration		
			A			L			Parking		
			O			D					
Depart		Arrive				H					
	I/S @ .33	I/S @ .545	O/S @ .33	O/S @ .545	P	0.000	0.000	T	0.00	0.00	
Purpose											
Sub-Total						0.00	0.00	0.00	0.00	0.00	
Grand Totals						0.00	0.00	0.00	0.00	0.00	

(1) Mode of Travel:

(2) Type of Subsistence:

NOTE: Daily total for subsistence not to exceed authorized amount for

P - Private Car
A - Air

G - Ground, rail, bus, taxi, parking fees
O - Other

B - Breakfast
L - Lunch

D - Dinner
H - Housing (Room)

subsistence not to exceed authorized amount for in-state or out-of-state travel.