

## KEY LARGO FIRE RESCUE AND EMS DISTRICT TRAVEL EXPENSE VOUCHER

Name CHRIS JONES Request Date 11/23/2016  
 Department KEY LARGO VOL. FIRE DEPT., INC. Title APPARATUS CONTRACT SIGNING  
 Destination HALLMARK FACILITY OCALA FLORIDA Mode of Transportation Used POV  
 Vacation Combined with Trip?  Yes  No If so, meal and hotel expenses cease upon termination of City business.  
 Purpose of Travel: APPARATUS FACTORY PLANT

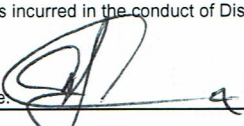
### ESTIMATED TRANSPORTATION COSTS

AIR FARE: \$0.00 RENTAL CAR: Rental Charge: \$0.00  
 ( \$551.00 plus on thirs of travel insurance) Fuel: \$0.00  
 MILEAGE REIMBURSEMENT-PRIVATE AUTO taxi fare if needed \_\_\_\_\_  
 AIRPORT PARKING & TOLLS \_\_\_\_\_  
 Other: LUGGAGE FEE \_\_\_\_\_  
 Note: Attach mapquest or similar for mileage documentation purposes.  
 TOTAL MILEAGE 0  
 REIMBURSEMENT @ 55.5 cents per mile \$0.00  
**TOTAL ESTIMATED TRANSPORTATION COSTS \$0.00**

### ESTIMATED LODGING, MEALS AND OTHER EXPENSES GSA rates - 1st and last day @ 75% of M&IE

*DATE IN GREEN IS TRAVEL START DATE. DATE IN RED IS TRAVEL END DATE. Note: First and last day of travel per diem rate is 75% of max. per diem rate.*

DATE	11/28/2016	11/29/2016									TOTAL
	MONDAY	TUESDAY									
ITEMS											
Lodging rate max.	0.00	0.00									\$0.00
per diem rate max	\$38.25	38.25									\$76.50
Other (Specify):											\$ -
											\$ -
											\$ -
<b>TOTAL</b>	<b>\$38.25</b>	<b>\$ 38.25</b>	<b>\$0.00</b>	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	<b>\$0.00</b>		<b>\$76.50</b>

I hereby certify that the above is a true and correct statement of travel expenses incurred in the conduct of District business and no expenses are 1 traveler. LEONARD C  
**GRAND TOTAL \$76.50**  
 Signature:  Date: 11/23/16  
 Department Head Approval \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Traveler \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### FINANCE DEPARTMENT USE ONLY

Total Travel Expenses Approved: \$76.50 Account No. \_\_\_\_\_  
 Date Received: \_\_\_\_\_  
 Approved for Payment \_\_\_\_\_ Date \_\_\_\_\_  
 Finance

# KEY LARGO FIRE RESCUE AND EMS DISTRICT TRAVEL EXPENSE VOUCHER

Name DONALD BOCK Request Date 11/23/2016  
 Department KEY LARGO VOL. FIRE DEPT., INC. Title APPARATUS CONTRACT SIGNING  
 Destination HALLMARK FACILITY OCALA FLORIDA Mode of Transportation Used POV  
 Vacation Combined with Trip?  Yes  No If so, meal and hotel expenses cease upon termination of City business.

Purpose of Travel: APPARATUS FACTORY PLANT

### ESTIMATED TRANSPORTATION COSTS

AIR FARE: <u>\$0.00</u>		RENTAL CAR: Rental Charge: <u>\$0.00</u>	
( \$551.00 plus on thirs of travel insurance)		Fuel: <u>\$0.00</u>	
MILEAGE REIMBURSEMENT-PRIVATE AUTO		taxi fare if needed	
DATE	FROM	TO	MILES
			AIRPORT PARKING & TOLLS
			Other: LUGGAGE FEE
TOTAL MILEAGE			0
REIMBURSEMENT @ 55.5 cents per mile			\$0.00
TOTAL ESTIMATED TRANSPORATION COSTS			\$0.00

Note: Attach mapquest or similar for mileage documentation purposes.

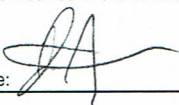
### ESTIMATED LODGING, MEALS AND OTHER EXPENSES GSA rates - 1st and last day @ 75% of M&IE

DATE IN GREEN IS TRAVEL START DATE. DATE IN RED IS TRAVEL END DATE. Note: First and last day of travel per diem rate is 75% of max. per diem rate.

DATE	11/28/2016	11/29/2016									TOTAL
	MONDAY	TUESDAY									
ITEMS											
Lodging rate max.	0.00	0.00									\$0.00
per diem rate max	\$38.25	38.25									\$76.50
Other (Specify):										\$	-
										\$	-
										\$	-
<b>TOTAL</b>	\$38.25	\$ 38.25	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$76.50

I hereby certify that the above is a true and correct statement of travel expenses incurred in the conduct of District business and no expenses are 1 traveler, LEONARD

**GRAND TOTAL \$76.50**

Signature:  Date: 11/23/16

Department Head Approval  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Traveler  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### FINANCE DEPARTMENT USE ONLY

Total Travel Expenses Approved: \$76.50 Account No. \_\_\_\_\_

Date Received: \_\_\_\_\_  
 Approved for Payment \_\_\_\_\_ Finance Date \_\_\_\_\_

## KEY LARGO FIRE RESCUE AND EMS DISTRICT TRAVEL EXPENSE VOUCHER

Name MARKUS GOLLING Request Date 11/23/2016  
 Department KEY LARGO VOL. FIRE DEPT., INC. Title APPARATUS CONTRACT SIGNING  
 Destination HALLMARK FACILITY OCALA FLORIDA Mode of Transportation Used POV  
 Vacation Combined with Trip?  Yes  No If so, meal and hotel expenses cease upon termination of City business.

Purpose of Travel: APPARATUS FACTORY PLANT

### ESTIMATED TRANSPORTATION COSTS

AIR FARE: <u>\$0.00</u>	RENTAL CAR: Rental Charge: <u>\$0.00</u>	Fuel: <u>\$0.00</u>			
( \$551.00 plus on thirs of travel insurance)					
MILEAGE REIMBURSEMENT-PRIVATE AUTO	taxi fare if needed				
DATE	FROM	TO	MILES	AIRPORT PARKING & TOLLS	Other: <u>LUGGAGE FEE</u>
11/28/2016	MIAMI, FL	OCALA, FL	361		
11/29/2016	OCALA, FL	MIAMI, FL	361		
TOTAL MILEAGE			722		Note: Attach mapquest or similar for mileage documentation purposes.
REIMBURSEMENT @ <del>55.5</del> <u>54</u> cents per mile			<del>\$405.15</del> <u>389.88</u>	TOTAL ESTIMATED TRANSPORTATION COSTS <u>\$45.15</u>	

### ESTIMATED LODGING, MEALS AND OTHER EXPENSES

GSA rates - 1st and last day @ 75% of M&IE

389.88

DATE IN GREEN IS TRAVEL START DATE. DATE IN RED IS TRAVEL END DATE. Note: First and last day of travel per diem rate is 75% of max. per diem rate.

DATE	11/28/2016	11/29/2016								TOTAL
	MONDAY	TUESDAY								
ITEMS										
Lodging rate max.	0.00	0.00								\$0.00
per diem rate max	\$38.25	38.25								\$76.50
Other (Specify):										\$ -
										\$ -
										\$ -
<b>TOTAL</b>	<b>\$38.25</b>	<b>\$ 38.25</b>	<b>\$0.00</b>	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	<b>\$0.00</b>	<b>\$76.50</b>

I hereby certify that the above is a true and correct statement of travel expenses incurred in the conduct of District business and no expenses are 1 traveler, LEONARD

Signature:  Date: <u>11-23-16</u>	Department Head Approval	Signature: _____ Date: <u>\$466.38</u>
Traveler	Signature: _____	Date: _____

### FINANCE DEPARTMENT USE ONLY

Total Travel Expenses Approved: \$491.65 Account No. \_\_\_\_\_

Date Received: \_\_\_\_\_  
 Approved for Payment \_\_\_\_\_ Date \_\_\_\_\_  
 Finance