MRCOG TRAVEL VOUCHER FOR TRAVEL
WITH OVERNIGHT LODGING

For travel with overnight lodging and reimbursement for actual meals, lodging, and other travel expenses incurred (receipts required)

Traveler: __________________________ Fund Number: __________________________
Destination: __________________________ G/L Number(s): __________________________

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<th>Business Travel Began</th>
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Mileage (privately-owned automobile)

________ (miles) × ______ (MRCOG approved mileage rate) $ __________

Airfare
Coach class commercial airfare paid by employee $ __________

Meals
Maximum of $55.00 per day for in-state and out-of-state travel $ __________

Meals (last day of travel)

a. Less than 2 hours of travel beyond the initial time of departure, max. none
b. 2 hours, but less than 6 hours beyond the initial time of departure, max. $18.00
c. 6 hours, but less than 12 hours beyond the initial time of departure, max. $40.00
d. 12 hours or more beyond the initial time of departure, max. $55.00 $ __________

Lodging
Single occupancy rate, government rate whenever possible $ __________

Other Expenses
Taxi, transportation fares, parking fees, registration fees, etc. $ __________

Total Cost of Travel $ __________

Less Travel Advance (up to 80% of total cost of travel) $ { _______ }

Amount Due to Employee or Public Officer $ __________

Employee/Public Officer Signature: __________________________ Date: __________

Approvals:

Supervisor: __________________________ Date: __________

Executive Director: __________________________ Date: __________