LCB TRAVEL VOUCHER FORM

Name: _____

Departure Date and Time:
Date you departed from home/office to begin travel: _____ Time: _____ am/pm

Arrival Date and Time:
Date you arrived at home/office to end travel: _____ Time: _____ am/pm

Mileage in Privately Owned Vehicle (POV)
Miles you drove in your POV from home/office to airport. _____ miles
Miles you drove in your POV from airport to home/office. _____ miles

Attach your receipts for the following:

1.	Parking fee at the terminal or depot	Total:	$ _____
2.	Tickets - Airline, train or bus	Total:	$ _____
3.	Registration fee, if paid from personal funds	Total:	$ _____
4.	Lodging (tax listed separately, if domestic)	Total:	$ _____
5.	Rental car	Total:	$ _____
6.	Highway tolls - (show below)	Total:	$ _____

7. Food receipts - only include if you requested and received Authorization for a higher allowance for your meals, i.e. AEA)

Taxis/Limos: To and from airport and hotels:

Date:	From:	To:	Cost:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Excess Taxis: To and from hotel and place of business at temporary duty station:

Date:	From:	To:	Cost:
_____	_____	_____	_____
_____	_____	_____	_____

Miscellaneous Expenses: Phone calls/faxing/out-of-town subway, etc.

Date:	From:	To:	Cost:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____