State of Nevada

TRAVEL EXPENSE REIMBURSEMENT CLAIM

(SEE STATE ADMINISTRATIVE MANUAL 0200 FOR TRAVEL REGULATIONS)

Name/Position _____

Internal ID _____

Department & Division Department of Wildlife

Official Station Carson city

I declare under penalties of perjury that to the best of my knowledge this is a true and correct claim in conformance with the governing statutes and the State Administrative Manual and its updates.

X I do **not** have a travel advance _____ I **do** have a travel advance from my agency or State Treasurer

_____
Signature of Traveler

_____
Supervisor's/Agency Approval

Transportation Codes: add all that apply

P - Plane
PP - Private Plane
PC - Private Car
OT - Other*: Limousine, Taxi, Shuttle, Rental Car, Inter-City Bus, Railroad
X - Passenger in Car
PT - Public Trans: Subway, City Bus
SC - State Car: Motor Pool or Agency Car
D - Diners Club

Miscellaneous Codes:

A - ATM Fees* **I** - Incidental Expense* **PA** - Parking* **D** - Diners Club

Traveler is:

_____ State Officer or Employee
_____ Board or Commission Member
_____ Independent Contractor Whose Contract Provides for Travel

Date	Destination and Purpose of Each Trip	Training Y/N	Travel Time Started	Travel Time Ended	Transportation Code	Transportation PC/PP Mileage	Transportation Cost	Miscellaneous Expenses Code	Miscellaneous Expenses 0.00	Daily Expenses Meals B	Meals L	Meals D	Daily GSA Rate	*GSA Lodging Rate	Total For Day
							0.00								0.00
							0.00								0.00
							0.00								0.00
							0.00								0.00
							0.00								0.00
															0.00
															0.00
															0.00
															0.00
															0.00
															0.00
															0.00
															0.00
															0.00
Camp Status					Org	Suborg	Job								
				CODE	0200	00	00								
Total of this Claim															0.00
Balance Due to Traveler:															0.00

***Receipts are required for:**
"Other" transportation expenses
ATM and bank transactions
ALL hotel & transportation expenses
Include a print out of the current GSA rate

Traveler is personally liable for repaying advances and Travel Card charges.

This form is used for the State to reimburse the traveler and must be submitted within one month of completion of travel unless prohibited by exceptional circumstances (SAM 0220.0).

* Lodging reimbursed at accrual cost not to exceed GSL rates.

Form: TE
Revised: JUL 2007