

PYRAMID LAKE PAIUTE TRIBE TRAVEL EXPENSE STATEMENT

TRAVELER: _____
 PROGRAM: _____
 ACCT. CODE: _____

HOLD:
 MAIL:
 OTHER:

Check #: _____ Check Date: _____
 Date Picked-up: _____ Date Mailed: _____
 Picked-up by: _____ Mailed by: _____

DEPARTURE		POINTS OF TRAVEL				ARRIVAL		AUTOMOBILE		
Date	Hour	From	Odometer	To	Odometer	Date	Hour	Total Mileage	GSA Rate	TOTAL
1										
2										
3										
4										
5										
6										
7										
8										
9										
TOTAL:									\$	-

JUSTIFICATION: _____

Attached is a written narrative.

I certify that this statement is true, correct and complete to the best of my knowledge. Payment for the attached receipts have not been previously submitted for payment.

 Date Traveler's Signature

 Date Approved By

GSA PER DIEM RATE / MEALS AND INCIDENTALS:

1st & last day @ 75% of M&IE

Travel Dates	No. of Days	@ Rate	TOTAL
			\$ -

Hotel: _____ Luggage: _____ \$ -

Taxi/Bus: _____ Tolls: _____ \$ -

Misc. Expense: _____ \$ -

Telephone: _____ \$3.50 first call \$ -

TOTAL EXPENSES CLAIMED \$ -

Travel Advance given? No ___ Yes ___ CK# _____ \$ -

Balance Due to Traveler: \$ -

Balance Due to PLPT: \$ -