State of Nevada

TRAVEL EXPENSE REIMBURSEMENT CLAIM

(SEE STATE ADMINISTRATIVE MANUAL 0200 FOR TRAVEL REGULATIONS)

Name ____________________________

Organization ____________________________

Department & Division **NV Commission on Toursim**

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

____
Agency Approval

Transportation Codes:

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

Miscellaneous Codes:

A - ATM Fees*
I - Incidental Expense

Traveler is:

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

	Destination and	Travel Time		Transportation			Miscellaneous Expenses		Daily Expenses				Total For
					PC/PP				Meals			Lodging	
Date	Purpose of Each Trip	Started	Ended	Code	Mileage	Cost	Code	Cost	B	L	D		Day
						0.00							0.00
						0.00							0.00
						0.00							0.00
						0.00							0.00
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						0.00							0.00
						0.00							0.00
						0.00							0.00
						0.00							0.00

Total of this Claim	0.00
Less Travel Advance Received from the Traveler's Agency or State Treasurer:	0.00
Balance Due to Traveler:	0.00

***Receipts are required for:**
"Other" transportation expenses
ATM and bank transactions
Out-of-state hotel & transportation expenses

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).

Form: TE
Revised: Jan. 2002

ATTACHMENT A