

Southwest Louisiana Convention & Visitor Bureau

EMPLOYEE TRADE SHOW TRAVEL EXPENSE REPORT

The statement on Page 2 & 3 must be completely filled by the payee prior to signature. Receipts must be attached as required by travel regulations.

DATE OF CLAIM	5/9/2017
FOR PERIOD	-
EVENT	

NAME OF OFFICER OR EMPLOYEE

ADDRESS

CITY

TRAVEL:

TOTALS

1.	PERSONAL AUTO: Per Mile Cost	0 mi. @	0.54	\$ -	
2.	AIRLINE: Attach Boarding Pass & Other Documents			\$ -	
3.	TAXI / SHUTTLE / PARKING / TOLLS			\$ -	
4.	AUTO RENTAL			\$ -	\$ -

LODGING:

5.	HOTEL (include tips)	\$ -			\$ -
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MEALS & ENTERTAINMENT:

6.	Restaurants / Snacks / Drinks - (Guests names on receipts)	\$ -			\$ -
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OTHER: PROMO MERCHANDISE, SHIPPING, OFFICE EXPENSE, ETC:

7.	OTHER: (do not include brochures)	\$ -			\$ -
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8.	TOTAL EVENT / TRADE SHOW COST/EMPLOYEE EXPENSES				\$ -
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DEDUCTIONS: PAGE 3 SECTION C

13.	DEDUCT BUREAU CR CARD CHARGES				-
14.	DEDUCT TRAVEL DRAW	CK #	0		-
15.	ERRONEOUS OR DISALLOWED ITEMS CHARGED ON SW LA CVB CR CARD				-

16.	TOTAL REIMBURSABLE / (REFUNDABLE) EXPENSES				\$ -
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Certificate by Payee

I certify that this expense report is just and true in all respects; that the distances shown were actually and necessarily traveled on the dates specified on official business only; that the reimbursable expenses charged were incurred on official business of the CVB and none of the expenses have been paid by the CVB, and that the full amount is justly due; and/or a personal check in the amount of the refundable Travel Draw balance is attached herewith.

SIGNED BY PAYEE	TITLE OR POSITION	OFFICIAL DOMICILE
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Certificate by Supervisor of Budget Unit

I certify that the charges set forth on this expense report have been examined by me; that the services for which the charges are made were necessary and proper; and that, in my opinion, the amounts claimed are just and reasonable.

SIGNED BY:	TITLE OR POSITION	OFFICIAL DOMICILE
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REMARKS BY SUPERVISOR OF BUDGET UNIT IN EXPLANATION OF UNUSUAL ITEMS ON BACK