

# City of Rochester

## Travel Reimbursement Voucher

Employee Name: \_\_\_\_\_

Department: \_\_\_\_\_

Date									Totals
<b>Transportation</b>									
Airfare									\$0.00
Parking & Tolls									\$0.00
Taxis									\$0.00
Auto Rental									\$0.00
Gas									\$0.00
Total		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Lodging</b>									
Hotels									\$0.00
<b>Meals</b>									
Breakfast									\$0.00
Lunch									\$0.00
Dinner									\$0.00
Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Other (List)</b>									
									\$0.00
									\$0.00
									\$0.00
Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Mileage</b>									
Beginning Mileage									
Ending Mileage									
Total Miles	0	0	0	0	0	0	0	0	
Rate per Mile	0.565	0.565	0.565	0.565	0.565	0.565	0.565	0.565	
Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Summary -</b>	<b>Total</b>	<b>Voucher</b>	<b>Amount</b>						
<b>Destination Detail (Purpose of Travel)</b>									
D A T E									

Prepared By: \_\_\_\_\_ Date \_\_\_\_\_

Approved By: \_\_\_\_\_ Date \_\_\_\_\_