COUNTY OF SUTTER

TRAVEL ADVANCE REQUEST
(Out-of-County Travel)

PAID THRU PAYROLL

	Employee Number	**Location**	
Fund No.	Name	City	State
Dept. No.	Department	Dates of attendance	

CURRICULUM DESCRIPTION_____
(Attach copy of Agenda)
AMOUNT OF TRAVEL ADVANCE REQUESTED:

Air, Train, Bus Fares _____		100%	$ _____
Lodging _____ Days _____	Per Day	100%	_____
Meals _____ Days _____	Per Day	80%	_____
Mileage _____ Miles _____	Per Mile	80%	_____

Total Estimated Expenses $ _____

Add: Special Fees (Attach Verification) Advanced 100% _____
AMOUNT OF ADVANCE $ _____

I HEREBY CERTIFY THAT THE AMOUNT REQUESTED AND TO BE RECEIVED IS FOR REIMBURSABLE TRAVEL EXPENSES TO BE INCURRED FOR COUNTY BUSINESS.

_____   _____
Employee's Signature   Date

I HEREBY CERTIFY THAT THE ABOVE NAMED EMPLOYEE IS REQUIRED BY THE DUTIES OF THEIR JOB TO PERFORM THE TRAVEL INDICATED ABOVE ON BEHALF OF THE COUNTY.

_____   _____
Department Head's Signature   Date

I N S T R U C T I O N S

Fill in the above form to request a travel advance. The actual advance is computed as a percentage of the itemized expenses as shown above. The maximums allowed in estimating the meals and lodging are stated in the Travel and Business Expense Policy. Special fees such as registration or tuition will be advanced 100%, if verification of the amount is attached. The minimum advanced is $50.

Attach two copies to a completed claim form. Present to the Auditor-Controller's office **21 DAYS** prior to date of departure.

When the trip is completed, **submit a claim form and travel expense form** with appropriate invoices and receipts attached. Claim must be submitted to the Auditor-Controller's office **within 5 days of your return.** The balance will be adjusted from your paycheck.

If the trip is cancelled, the advance must be returned to the Auditor-Controller's office immediately.

(revised 6/03)