

COUNTY OF SUTTER
TRAVEL ADVANCE REQUEST
(Out-of-County Travel)

	Employee Number	Travel Destination	
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

INSTRUCTIONS

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.**

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