

**KINGSBOROUGH COMMUNITY COLLEGE
THE CITY UNIVERSITY OF NEW YORK
OVERNIGHT/OUT-OF-TOWN TRAVEL REPORT**

NAME: _____ DEPARTMENT: _____

EMPLID NUMBER: _____ ADDRESS: _____

NAME OF MEETING/CONFERENCE: _____

LOCATION OF MEETING/CONFERENCE: _____ COUNTY: _____

LOCATION (Address & Zip code)	DATE	TIME OF DEPARTURE	TIME OF ARRIVAL
START:			
RETURN:			

DOCUMENTATION REQUIRED: ORIGINAL RECEIPTS AND/OR CANCELED CHECKS, AND CONFERENCE AGENDA MUST BE INCLUDED FOR ALL EXPENDITURES. EMPLOYEE POST ATTENDANCE REPORT TO BE REPORTED ON THE BACK OF THIS FORM.

TRANSPORTATION EXPENSE

PUBLIC TRANSPORTATION *(Specify): _____ TAX ID #: _____ \$ _____
 CAR RENTAL AGENCY NAME*: _____ TAX ID #: _____ \$ _____
 AUTO: Odometer END _____ START _____ TOTAL MILES: _____ @\$0.52 per Mile \$ _____
 TOLLS – ATTACH RECEIPTS \$ _____
 LOCAL TRAVEL – (Specify): _____ \$ _____
 * IF PAYMENT TO A TRAVEL AGENCY GIVE NAME: _____ TAX ID #: _____ \$ _____
TOTAL TRANSPORTATION EXPENSES: (1) \$ _____

ROOM AND BOARD EXPENSE (HOTEL TAX ID NUMBER : _____)

DATES (Specify)									TOTAL
Air-Fare / Train									
Hotel Only									
Breakfast									
Lunch									
Dinner									

TOTAL ROOM AND BOARD EXPENSES: (2) \$ _____

MISCELLANEOUS EXPENSE

INCIDENTALS @ \$5.00/DAY \$ _____
 REGISTRATION FEE: \$ _____
 OTHER: \$ _____

TOTAL MISCELLANEOUS EXPENSES: (3) \$ _____

TOTAL EXPENDITURES: (1) + (2) + (3) \$ _____

I hereby certify that the above account of expenditures is a true and correct statement of disbursements actually made by me; that the expenditures of the above sums were necessary in the performance of my duties; that no part thereof has been paid except as stated thereon, and that the balance therein stated is actually due and owing. Fraudulent bills or claims are punishable by law.

EMPLOYEE SIGNATURE: _____ TITLE: _____ DATE: _____

SUPERVISOR SIGNATURE: _____ FOR: \$ _____ DATE: _____

PROVOST SIGNATURE: _____ FOR: \$ _____ DATE: _____

(PLEASE FILL OUT BACK PORTION)

EMPLOYEE POST ATTENDANCE REPORT

(Per City of New York Comptroller’s Internal Control and Accountability Directive #6)

A brief synopsis of the relevant subject matter covered at the training, education or professional conference must be submitted to the Agency Head of Designee within 14 business days of the employee’s return and be available for Comptroller’s audit. The synopsis should include, but not be limited to, a description of the benefits that will accrue to the agency because of attendance, the functional areas of the agency impacted, and any action taken or to be taken as a result of attendance. Additionally, the employee must ensure that relevant materials and/or a summary briefing of the information gained at the meeting shared with appropriate members of the agency’s staff.
