TRAVEL VOUCHER (Temporary Duty Travel)

SECTION A - IDENTIFICATION 1. TRAVEL AUTHORIZATION NO. 2. SOCIAL SECURITY NO. 3. NAN						. NAME	(Last)					(First)				(M	iddle Initial)	4. AGE	NCY E		
5. AGENCY ORIGINATING OFFICE NUMBER			6. TRAVELER ORIGINATING OFFICE NUMBER					F TRA FROM Day		NSES	THI		Year	OC = Outside		nestic eign TDY side Cont.	stic gn TDY e Cont. U.S.		9. RECLAIM AMOUNT INCLUDED		
10. LEAVE TAKEN $Y = Yes \qquad N = No$			11. TRAINING DOCUMENT NO. (For Purpose of Travel Code 3 Only)					12.	OFFICIAL	GR = Escorted CIAL DUTY STATION CITY AND STATE 13. RESIDENT CITY AN						ND STATE (If other than official station)					
14. POST APPROVAL INDICATOR 15. TOTAL NIGHTS LODGING Y = Yes N = No						16. NUMBER OF NIGHTS IN APPROVED ACCOMMODATIONS PER THE FIRE SAFETY ACT STANDARDS								,							
SECTION B -TRAVEL VOUCHER MAILING ADDRESS OPTIONS																					
17. SALARY ADDRESS 19. SPECIAL ADDRESS									20. FOREIGN ADDRESS 21. TRAVEL EFT ACCOUNT												
1. (35)▶																					
18. T&A CONTACT POINT 2. (35) ► 3. City (20) ► State (2) ► Zip Code (9) ►																					
SECTION C - TRANSPORTATION COSTS State (2)																					
22. METHOD OF	22. 23. 24. 25. CAR RENTAL 26. 28. SUMMAR									RY OF SUBSISTENCE											
PAYMENT	ETHOD OF VENDOR/ I PAYMENT CARRIER		NUMBER	MILES	DAYS	_	AMO	MOUNT		TDY LOCATION						NO. OF	AMOUN				
							\$			CNTRY CODE		CITY CODE CIT		TY or COUNTY		_	STATE DAYS		1		
							+		\rightarrow			╁				\dashv			\$	-	
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							_					1				_					
If paymen	t was mad	e hv tra	veler				+					+				\dashv					
complete S	Section G	on rever	rse 101	ALS▶	Cl l. 'e		\$		(Image)		20 0		DIEM				Т		Т	NFC	USE
27. AIRLINE A				ss Fare $_{\Lambda_1}^{(}$		ON	■No	n-cont	tract (Insert Code)		29. PER DIEM No. of Days [] \$										
SECTION E – ACCOUNTING CLASSIFICATION 45. AUTHORIZATION ACCOUNTING PURPOSE OF TRAVEL CODES									30. ACTUAL SUBSISTENCE No. of Days []												
(Check this block if accounting and purpose of travel code(s) from travel outhorization are								31. MILEAGE Rate [t] Miles []													
of travel code(s) from travel authorization are to be charged for the total voucher claim.) 2 = Information meeting to be charged for the total voucher claim.) 3 = Training attendance to the total voucher claim.									Rate [c] Miles [] Rate [c] Miles []]							
46. DISTRIBUTED ACCOUNTING (Check this block distribute total claim from 5 = Conference attendance 13 = Rest and Recuperation									Rate [¢] Miles []						+	_					
Section D to the applicable Purpose of Travel 7 = Entitlement/home leave 14. = Education								32. PARKING, TOLLS, ETC.													
Code and Accounting Classification line.) 8 = Special mission travel 15 = Info PURPOSE CODE ACCOUNTING CLASSIFICATION							Т	PERCEN	TAGE	33. PLANE, BUS, TRAIN (Paid by Traveler)											
									%	34. UNACCOMPANIED BAGGAGE											
							_			35. LOCAL TRANSPORTATION						+					
								\dashv			36. MISCELLANEOUS EXPENSES							+			
		37. CAR RENTAL 38. TOTAL CLAIM							_			\vdash									
	THESE PERCENTAGES MUST EQUAL 100% (Blocks 29 thru 37)								\$		+	_									
SECTION	F - CEF	RTIFIC	ATIONS								39. TRAVEL ADVANCE AMOUNT OUTSTANDING						L				
FRAUDULEN (28 USC 2514)	and may resul																	_			
(18 USC 287; i.i CLAIMANT'S	RESPONSII										41 AMT OF VOLICHER (Plock 29) TO BE ARRUED										
against other par payment for clai	ms shown here	in. All trave	el and reimbursa	ble claims	were incu	rred on of	ficial bu	isiness	of the Unit	ed States	BILL NO. ▶										
Government. All tickets, coupons, promotional items and credits received in connection with travel claimed on this voucher have been accounted for as required by 41CFR 301-304 and other regulations. I have reviewed this voucher and certify it to be correct.									t 42. ADDITIONAL ADVANCE AMOUNT REPAID (Check or money order attached)												
							FINAL VOUCHER INDICATOR		43. REMAINING ADVANCE BALANCE							+					
								Y = Yes N = No		(Block 39 minus Block 40 and Block 42) 44. NET TO TRAVELER					+		+	\vdash			
APPROVING OFFICER'S RESPONSIBILITIES AND SIGNATURE. In approving this voucher, I have determined that (1) Reimbursement is claimed for official travel only; (2) Use of rental car, taxicab, or other special conveyance for which									(Block 38 minus Block 40 and Block 41)				\$	\$ TOTAL DIFFERENCE							
reimbursement is claimed is to the Government's advantage; and (3) Long distance phone calls and supplies or equipment purchased are necessary and in the interest of the Government. Note: To approve long distance phone calls, approving officer must have written authorization from Agency Head or his/her designee (31 USC 1348).											(=/////////////////////////////////////		-/		'	DII I L					
								51.	SOCIAL S	SEC	URITY NO.	52. D Mon	ATE APP		ED 50	3. PHONE (A	rea Code	and N	lo.)		
54. NAME AND TITLE (Last, First, Middle Initial)(Type or Print) AGENCY CODE								55.	CONTACT PERSON'S NAME 56. PHONE (Area Code and No					l o.)							
																	F	ORM AD - 6	16 (USD	A) (Rev	v 11/96)

SOCIAL SECURITY NO.	TRAVELER'S NAM	1E						
SECTION G-SCI	HEDULE OF	EXPENSES	AND AMOU	NTS CLAIM	ED			
ITINERARY FROM								TOTALS
DATE (Month/Day)								Transfer
CITY								these totals to
STATE								Section D on
TIME								Voucher Front.
TO TDY LOCATION								If additional
DATE (Month/Day)								
								days are
CITY								required, use
COUNTY								continuation
STATE								sheet
TIME								
PER DIEM	:	:		:		:		TOTAL NO. DAYS
NO. OF DAYS		1	!	!	1	1		
LODGING (Receipt Required)	:	1	,	i				
MEALS AND INCIDENTAL EXPENSES								
LESS MEALS AT GOVERNMENT EXPENSE	:				:			
	1	:	1	:		:		TOTAL PER DIEM
PER DIEM AMOUNT	:	1	1		,	,	1	\$ TOTAL NO. DAYS
ACTUAL SUBSISTENCE	:	,		:	;	;	;	TOTAL NO. DATS
NO. OF DAYS								
LODGING (Receipt Required)	1	<u>:</u>		:		<u> </u>	'	
BREAKFAST LUNCH		1						
DINNER		,	1	,	1	'	1	
M&IE/OTHER								
	- :						•	TOTAL ACTUAL
ACTUAL SUBSISTENCE AMOUNT	:	:	:	:	:	:		SUBSISTENCE \$
MILEAGE								TOTAL MILES
MILES								
RATE PER MILE	é	¢	é	¢	¢	ę	¢	
	:	:				:	:	TOTAL MILEAGE
MILEAGE AMOUNT	:		:	:	:	:		\$
	:				:	:	:	TOTAL PARKING
PARKING, TOLLS, ETC.		:	:	:		i i		\$
PLANE, BUS, TRAIN	:	:	:	:	:	:	:	TOTAL PLANE, BUS, TRAIN
(Paid By Traveler)	:				:	:	:	\$
UNACCOMPANIED BAGGAGE	:				:	:		TOTAL UNACCOMPANIED BAGGAGE \$
LOCAL TRANSPORTATION NO. TRIPS								TOTAL LOCAL TRANSPORTATION
DAILY EXPENSE			:					\$
MISCELLANEOUS EXPENSES			:		:			TOTAL MISCELLANEOUS
TELEPHONE CALLS		:	:					
SUPPLIES, ETC. CAR RENTAL	 			<u> </u>			<u> </u>	\$ TOTAL CAR RENTAL
(Paid by Traveler) Receipt and Car Rental] :	:	:	:	:	:	:	TOTAL OAN NEWTAL
Agreement Required	1 :	:	:	:	:	:	:	
RENTAL EXPENSE GASOLINE EXPENSE	.	:	<u>.</u>					\$
REMARKS	· · · · · ·	· · ·	· · ·					Ψ
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PRIVACY ACT NOTICE. The following information is provided to comply with the Privacy Act of 1974 (P.L. 93-579). The information requested on this form is required under the provisions of 5 USC, Chapter 57 (as amended) and Executive Orders 11609 of July 22, 1971, and 11012 of March 27, 1962, for the purpose of recording travel expenses incurred by the employee and to claim other entitlements and allowances as prescribed in the Federal Travel Regulations (41 CFR 301-304). The information contained in this form will be used by Federal Agency officers and employees who have a need for such information in the performance of their duties. Information will be transferred to appropriate Federal, State, local or foreign agencies, when relevant to civil, criminal, or regulatory investigations or prosecutions or pursuant to a requirement by GSA or such other agency in connection with the hiring or firing, or security clearance, or such other investigations of the performance of official duty in Government service. Failure to provide the information required will result in delay or suspension of the employee's claim for reimbursement.