FI51A CY20 AR
Revised: 01/2020
Division of Finance

Control Number (Not saved in FINET)

Document Date

FINET Transaction ID

Code | Dept | Document Number

*Vendor Code (EIN) 00000T

*Phone

*Traveler Name

*Department / Unit

Departure Date | Departure Time | Destination

Street Address

Return Date | Return Time

City | State UT | Zip Code

*Department Name

Auto Fill Enabled

Clear Form

Accounting Period | Fiscal Year | Budget Fiscal Year

*Division Name

State Employee Travel Reimbursement Request for In-State Travel

Totals

Business Phone 6132	Meal Allowance 6005	Lodging 6006	Miscellaneous 6003	Mileage 6002	Mileage 6004	Transportation 6007	Registration 6276
$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00

Grand Total of All Travel	$0.00
(Less) Travel Advance Clearing, or Other	$0.00
(Less) Transportation Expenses Paid by the State	$0.00
(Less) Registration Paid by the State	$0.00
(Less) Lodging Paid by the State	$0.00
(Less) Meals Paid on Travel Card	$0.00
(Less) Business Phone Paid by the State	$0.00
(Less) Miscellaneous Expenses Paid by the State	$0.00
Due To / (From) Traveler	$0.00

Additional Comments

Funding

Object	$ Amount	Fund	Dept	Unit	Appr	Activity	Function	Program	Phase
6132	$0.00								
6005	$0.00								
6006	$0.00								
6003	$0.00								
6002	$0.00								
6004	$0.00								
6007	$0.00								
6048	$0.00								
6276	$0.00								
Total	$0.00	Due To / (From) Traveler			$0.00	Amount Difference			$0.00

I, the traveler, hereby certify that all items of expense included in this statement were incurred in the discharge of authorized official business and that the amounts are correct and proper.

Traveler's Title

*Traveler's Signature

The undersigned hereby certify that the expenses on this form were authorized as essential to official state business and payment thereof will not exceed appropriation.

*Budget & Accounting Officer or Authorized Agent

*Dept. Head or Authorized Agent Approval (Can be the same as B&A Officer or Auth. Agent.)

*Required Fields

Meals & Lodging

Date MM/DD/YYYY	Time HH:MM AM/PM	Itinerary From	Itinerary To	Breakfast	Lunch	Dinner	Total Meals	Lodging Amount
							$0.00	
							$0.00	
							$0.00	
							$0.00	
							$0.00	
							$0.00	
							$0.00	
							$0.00	
							$0.00	
							$0.00	
							$0.00	
							$0.00	
						Totals	$0.00	$0.00

Miscellaneous

Dates MM/DD/YYYY	Registration Fees	Business Phone	Personal Phone	Other	Other Description
Totals	$0.00	$0.00	$0.00	$0.00	

Transportation

Date MM/DD/YYYY	Transportation Code	Transportation Amount	Private Vehicle Mileage	Private Vehicle Rate	Private Vehicle Amount
	N/A				$0.00
	N/A				$0.00
	N/A				$0.00
	N/A				$0.00
	N/A				$0.00
	N/A				$0.00
	N/A				$0.00
	N/A				$0.00
	N/A				$0.00
	N/A				$0.00
	Total	$0.00		Total	$0.00