

**TOWN OF GREENFIELD
TRAVEL/CONFERENCE/MEETING REQUEST AND APPROVAL FORM**

Date submitted: ____/____/____

The information provided below explains the travel plans that I am requesting for Town of Greenfield related work and to receive reimbursement for the expenses involved.

Employee Name _____

Department _____

Title/Position _____

Description of Travel _____

Dates: Beg: ____/____/____ End: ____/____/____ Location: _____

ESTIMATED EXPENSES: (Please attach brochure or meeting notice).

Mileage: _____ miles @ \$.38/mile \$ _____

Cost of Transportation by taxi, rental car, train, bus, or air \$ _____

Accommodations, Hotels/Motels \$ _____

Registration Fee \$ _____

Meals \$ _____

TOTAL ESTIMATED EXPENSES \$ _____

COMMENTS: _____

Employee's Signature

The Travel plans above have been evaluated and approved.

Maximum reimbursement allowed: \$ _____ Account number: _____

Supervisor Signature

Department Head Signature

Mayor

TO BE SUBMITTED AFTER RETURNING FROM TRAVEL. NOTE: ORIGINAL RECEIPTS AND/OR ORIGINAL CANCELLED CHECK MUST BE ATTACHED.

ACTUAL EXPENSES

Mileage: _____ miles @ \$.38/mile \$ _____

Cost of Transportation by taxi, rental car, train, bus, or air \$ _____

Accommodations, Hotels/Motels \$ _____

Registration Fee \$ _____

Meals \$ _____

TOTAL ACTUAL EXPENSES \$ _____