

# San Juan County Travel Form 2022

Name: \_\_\_\_\_

Date	Destination		Purpose	Lodging	Meals	Mileage		Misc	TOTAL
	From:	To:		Attach employee paid receipt & enter amount. Own Lodging \$48	\$11 Breakfast \$14 Lunch \$20 Dinner	Enter # of Miles traveled in your Private vehicle	Enter amount current rate is 58.5 cents/mile	Attach receipts & enter amount	

**All travel expenses must be submitted within 30 days of travel.**

**Out of State Travel - attach approved request to this form.**

**Attach receipts for expenses paid by employee that are to be reimbursed.**

The above listed items and services were received and are correct and are for charges incurred for official county business. No part of the above charges have been paid by any public or private entity or individual. If reimbursement is received from any other entity the funds will be turned into the County.

Grand Total to be paid to employee: \_\_\_\_\_

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

List expense codes and amounts: \_\_\_\_\_