

**Travel Expense Form**

All travel, including registration, MUST be pre-approved.
The MAXIMUM reimbursement of allowable expenses per member is \$1,000.
State mandatory training and/or meetings may exceed the maximum reimbursement cap.

BRAZOS VALLEY REGIONAL ADVISORY COUNCIL

Date Issued: 8/7/2013

Name: _____

Date Revised: 1/7/19

Phone Number: _____ Agency: _____

Destination: _____

Purpose of Trip: _____

Mode of
Transportation: _____**OUT-OF-REGION TRAVEL EXPENSE STATEMENT**

A. Departure Date/Time: _____ Return Date/Time: _____

B. Odometer Reading Begin: _____ Odometer Reading End: _____

Mileage: _____ miles **x** \$0.56 \$ 0

C. Lodging Cost (Attach hotel receipts) \$

D. Meals ("Quarters" GSA rates or \$45/day) \$

E. Airfare (Attach travel itinerary and boarding passes) \$

F. Conference Fees \$

G. Other Expenses \$

\$

\$

\$

Total: \$ 0.00

Requested By: _____

Date: _____