



JOE LOMBARDO
GOVERNOR

CHRISTOPHER SEWELL
DIRECTOR

DRAZEN ELEZ
ADMINISTRATOR

VR Contractor Travel Pre-Approval & Travel Reimbursement Form

Mileage, meals and lodging are reimbursed at GSA rates. Visit www.gsa.gov for more information.

Traveler Information

Traveler's Name:		
Departing Address:		
Destination Address:		
Purpose (Description/Notes):		
Departure Date/Time	Day:	Time:
Return Date/Time	Day:	Time:

Traveler Signature _____ Print Name _____ Date _____

VR Pre-Travel Approval:

Counselor Signature _____ Print Name/Title _____ Date _____

Trip Expenses

Lodging	Total Nights	Total Paid	<i>Receipt submission required.</i>
Mileage	Total Miles	Total Paid	<i>Mileage is calculated from the Departing Address to the Destination Address, where the services are being provided.</i>
Meals & Incidentals	Total Paid		<i>Examples: Meals, Public Transportation, Railroad, Shuttle, etc. Receipt submission required.</i>

Traveler Signature _____ Print Name _____ Date _____

Agency Travel Expenses Approval:

Counselor Signature _____ Print Name/Title _____ Date _____