

| DATE | TRAVEL (Show Each City Visited) | | TRANSPORTATION | | | | SUBSISTENCE | | | OTHER EXPENSES | |
|------|---------------------------------|----|-----------------------|---------------------------------|--------------|-----------------|-----------------------|--------------|-----------------|----------------|--------|
| | From | To | 1 M O D E | Daily Private Car Mileage | In-Stat e | Out of State | 2 T Y P E | In-Stat e | Out of State | Explanation | Amount |
| | | | P | @ | | | B | | | | |
| | | | A | | | | L | | | | |
| | | | O | | | | D | | | | |
| | | | R | | | | H | | | | |
| | | | P | @ | | | Tot | | | | |
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| | | | R | | | | H | | | | |
| | | | P | @ | | | Tot | | | | |

| | | | | |
|-----------------|-----------------|----------------|----------------|--------------------|
| TOTAL TRANS. | TOTAL TRANS. | TOTAL SUBS. | TOTAL SUBS. | TOTAL OTHER EXP |
|-----------------|-----------------|----------------|----------------|--------------------|

(3) Daily total for subsistence not to exceed authorized amount for in-state o334r o349.92ut-of state travel.

(1) Mode of Travel:
P – Private Car
A – Air
O – Other, rail, bus taxi, tolls, parking fees
R – Rental Car

(2) Type of Subsistence:
B – Breakfast
L – Lunch
D – Dinner
H – Room (Housing)
Tot – 24 hr. period