TRAVEL VOUCHER OR SUBVOUCHER form.						Use type	ewrite	er, ink,	or ball point	t pen. PRE	SS HA	RD.	DO NOT	ise p	enci	il. If more space			
is needed, continue in remarks. 1. PAYMENT SPLIT DISBURSEMENT: The Paying Office will pay directly to the Government Travel Charge Card (GTCC) contractor the portion of your reimbursement representing travel charges for transportation, lodging, and rental car if you are a civilian employee, unless you elect a different amount. Military personnel are required to																			
	Electro	onic Fund designate a payment that equals the total of their			ir outstan	tanding government travel card balance to the GTCC contr				ntractor.	ractor.								
		fer (EFT) NOTE: A solit disbursement is only necessary when a GTCC is used while on official travel for the Government. Pay the following amount of this reimbursement directly to the Government Travel Charge Card contractor:																	
2. NAME (Last, First, Middle Initial) (Print or type) 3. GRAI					DE 4. SSN			5. TY	PE C	F PAYMENT	(X as	applio	cable)						
A ADDRESS AND STATE OF THE STAT											_	TDY			1	nber/Employee			
6. ADDRESS. a. NUMBER AND STREET					b. CITY			C.		STATE d. ZIP CODE			PCS	endent(s)		Othe			
e. E-MAIL ADDRESS											10. F	_ '	D.O. USE ON	ΙΥ	DLA				
7. DAYTIME TELEPHONE NUMBER & 8. TRAVEL ORDER/AUTHORIZATION									NMENT PAYM	ENTS/			OUCHER NU		R				
ARE	A COD	E		NUMBER	•			ADVANCES											
11. ORGANIZATION AND STATION											b. S	b. SUBVOUCHER NUMBER							
12. DE	PENDE	NT(S) (X and	l complete as ap	plicable)				13. DEPENDENTS' ADDRESS ON RECEIPT OF ORDERS (Include Zip Code)					c. P	c. PAID BY					
ACCOMPANIED UNACCOMPANIED																			
a.	NAME ((Last, First, M	liddle Initial)	b. RELATI	ONSHIP	c. DATE OF OR MAR	BIRTH RIAGE												
								14. HAVE	HOU	SEHOLD	GOODS BEE	N SHIPPED?	d COMPUTATIONS						
								(X on			NO (Explain i	n Remarks)	u. COMPUTATIONS						
	NERAR	Υ						c. MEANS	/ RF	d. ASON	е.	f.							
a. DAT 2020		b. PL	ACE (Home, Of City	fice, Base, Ac and Country,	ctivity, City etc.)	/ and State;		MODE O	F	FOR	LODGING COST	POC MILES							
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		/EL (X one)		OPERATE		PA	SSENGE	ER							ependent Travel				
18. REIMBURSABLE EXPENSES a. DATE b. NATURE OF EXPENSE			c. AMO			4	12 HOURS O	(5) DLA (6) Reimbursable Expenses											
а. ц	DATE		b. NATURE OF EXPENSE				UNI	d. ALLO	WED					(7) Total					
									MORE THAN 12 HOURS BUT 24 HOURS OR LESS			(8) Less Advance							
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20.a. C	LAIMAI	NT SIGNATU	IRE			•												b. DATE	
c. REVIEWER'S PRINTED NAME d. REVIEWER SIG						GNATURE				e. TE	e. TELEPHONE NUMBER				f. DATE				
21.a. APPROVING OFFICIAL'S PRINTED NAME b. SIGNATURE									c. TE	c. TELEPHONE NUMBER				d. DATE					
22. AC	COUNT	ING CLASSI	FICATION																
23. CO	LLECT	ION DATA																	
24. COMPUTED BY 25. AUDITED BY 26. TRAVEL ORDER/ AUTHORIZATION POSTED BY						ВҮ 27. І	RECEI	VED (Pa	yee Signature	and Date or 0	Check N	o.)		28	. AMC	OUNT PAID			

PRIVACY ACT STATEMENT

AUTHORITY: 5 U.S.C. Section 301; Departmental Regulations; 37 U.S.C. Section 404, Travel and Transportation Allowances, General: DoD Directive 5154.29, DoD Pay and Allowance Policy and Procedures; Department of Defense Financial Management Regulation (DoDFMR) 7000.14.R., Volume 9; and E.O. 9397 (SSN), as amended.

PRINCIPAL PURPOSE(S): To provide an automated means for computing reimbursements for individuals for expenses incurred incident to travel for official Government business purposes and to account for such payments.

Applicable SORN: T7333 (http://privacy.defense.gov/notices/dfas/T7333.shtml).

ROUTINE USE(S): Certain "Blanket Routine Uses" for all DoD maintained systems of records have been established that are applicable to every record system maintained within the Department of Defense, unless specifically stated otherwise within the particular record system notice. These additional routine uses of the records are published only once in each DoD Component's Preamble in the interest of simplicity, economy, and to avoid redundancy. Applicable SORN: http://dpclo.defense.gov/privacy/SORNs/component/dfas/preamble.html.

DISCLOSURE: Voluntary; however, failure to furnish the requested information may result in total or partial denial of the amount claimed. The Social Security Number is requested to facilitate the possible collection of indebtedness or credit to the DoD traveler's pay account for any residual or shortage.

PENALTY STATEMENT

There are severe criminal and civil penalties for knowingly submitting a false, fictitious, or fraudulent claim (U.S. Code, Title 18, Sections 287 and 1001 and Title 31, Section 3729).

INSTRUCTIONS

ITEM 1 - PAYMENT

Member must be on electronic funds (EFT) to participate in split disbursement. Split disbursement is a payment method by which you may elect to pay your official travel card bill and forward the remaining settlement dollars to your predesignated account. For example, \$250.00 in the "Amount to Government Travel Charge Card" block means that \$250.00 of your travel settlement will be electronically sent to the charge card company. Any dollars remaining on this settlement will automatically be sent to your predesignated account. Should you elect to send more dollars than you are entitled, "all" of the settlement will be forwarded to the charge card company. Notification: you will receive your regular monthly billing statement from the Government Travel Charge Card contractor; it will state: paid by Government, \$250.00, 0 due. If you forwarded less dollars than you owe, the statement will read as: paid by Government, \$250.00, \$15.00 now due. Payment by check is made to travelers only when EFT payment is not directed.

REQUIRED ATTACHMENTS

- 1. Original and/or copies of all travel orders/authorizations and amendments, as applicable.
- 2. Two copies of dependent travel authorization if issued.
- 3. Copies of secretarial approval of travel if claim concerns parents who either did not reside in your household before their travel and/or will not reside in your household after travel.
- 4. Copy of GTR, MTA or ticket used.
- 5. Hotel/motel receipts and any item of expense claimed in an amount of \$75.00 or more.
- 6. Other attachments will be as directed.

ITEM 15 - ITINERARY - SYMBOLS

15c. MEANS/MODE OF TRAVEL (Use two letters)

GTR/TKT or CBA (See Note)	- T	Automobile	
Government Transportation	- G	Motorcycle	- M
Commercial Transportation		Bus	- B
(Own expense)	- C	Plane	- P
Privately Owned		Rail	- R
Conveyance (POC)	- P	Vessel	- V

Note: Transportation tickets purchased with a CBA must not be claimed in Item 18 as a reimbursable expense.

15d. REASON FOR STOP

Authorized Delay Authorized Return	- AD - AR	Leave En Route - LV Mission Complete - MC
Awaiting Transportation	- AT	Temporary Duty - TD
Hospital Admittance	- HA	Voluntary Return - VR
Hospital Discharge	- HD	·

ITEM 15e. LODGING COST

Enter the total cost for lodging.

ITEM 19 - DEDUCTIBLE MEALS

Meals consumed by a member/employee when furnished with or without charge incident to an official assignment by sources other than a government mess (see JFTR, par. U4125-A3g and JTR, par. C4554-B for definition of deductible meals). Meals furnished on commercial aircraft or by private individuals are not considered deductible meals.

29. REMARKS

- a. INDICATE DATES ON WHICH LEAVE WAS TAKEN:
- b. ALL UNUSED TICKETS (including identification of unused "e-tickets") MUST BE TURNED IN TO THE T/O OR CTO.