TRAVEL VOUCHER OR SUBVOUCHER form.						ad Privacy Act Statement, Penalty Statement, and Instructions on back before completing m. Use typewriter, ink, or ball point pen. PRESS HARD. DO NOT use pencil. If more space needed, continue in remarks.										
ting travel charges for transportation, lodging, and rental					ay directly to the Government Travel Charge Card (GTCC) contractor the portion of your reimbursement represen- al car if you are a civilian employee, unless you elect a different amount. Military personnel are required to											
Electronic Fund Transfer (EFT) Electronic Fund Transfer (EFT) Payment by Check 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. GRA					DE	4. SSN				OF PAYMENT						
					c. STATE d. ZIP CODE			_	TD	-		ember/Employee				
6. ADDRESS. a. NUMBER AND STREET b. CITY							C. STA	IE	d. ZIP CODE	=	PC	-		ther		
													pendent(s)	DI	_A	
e. E-MAIL ADDRESS 7. DAYTIME TELEPHONE NUMBER & 8. TRAVEL ORDER/AUTHORIZATION						9. PREVIOUS GOVERNMENT PAYMENTS/					ITS/	10. FOR D.O. USE ONLY a. D.O. VOUCHER NUMBER				
AREA CODE NUMBER & 8. TRAVEL ORDER/AUTHORIZATION NUMBER						ADVANCES										
11. ORGANIZATION AND STATION						-						b. SUBVOUCHER NUMBER				
12. DEPENDEN	T(S) (X and	complete as an	plicable)				13. DEPENDENTS' ADDRESS ON RECEIPT OF C. PAID BY									
ACCOMF		··· / ···· /		CCOMPA	NIED		ORDERS (Include Zip Code)									
a. NAME (L	ast, First, M	iddle Initial)	b. RELATION	ONSHIP	c. DATE OF OR MARI	BIRTH										
					ORMAN	NAGE										
							14. HA (X c		OUSEH	DLD G	SOODS BEEN S	SHIPPED?	d. COMF	UTATIONS		
								YES		N	O (Explain in R	emarks)				
15. ITINERARY a. DATE		AOE (11 04		1			c. MEAN	S/	d. REASO	N	e. LODGING	f. POC				
2020			and Country,	etc.)	and State;		MODE TRAV		FOR STOP		COST	MILES				
03/11 DEP	Ft. Bra	.gg, NC 28	303					_								
03/11 ARR	Ft. Bra	gg, NC 28	303				~ P		TD	_						
03/16 DEP		88, -					CP									
03/17 ARR	Camp	Humphrey	vs, Korea					-	MC							
DEP								-								
ARR DEP	-							-								
ARR																
DEP	-															
ARR																
DEP	-												e. SUMN	ARY OF PAYN	MENT	
ARR													(1) Per D	liem		
DEP													(2) Actua	I Expense Allo	wance	
ARR												(3) Milea	ge			
16. POC TRAVE	EL (X one)	OWN/	OPERATE		PA	SSENG	ĒR		17.	DUR	ATION OF TRA	VEL	(4) Depe	ndent Travel		
18. REIMBURS	ABLE EXPE	NSES							12 HOURS OR LESS				(5) DLA			
a. DATE		b. NATURE O	F EXPENSE		c. AMO	UNT	d. ALL	.OWE	D	''			(6) Reimbursable Expenses		nses	
										М	IORE THAN 12	HOURS	(7) Total			
										B	UT 24 HOURS	OR LESS	(8) Less			
										м	IORE THAN 24	HOURS	(9) Amou			
										000		DUCTO	(10) Amo	unt Due		
											DATE		F MEALS	a. DA	TE	b. NO. OF MEALS
										a.	DAIL	D. NO. 0	INILALO	a. DA		5. NO. OF WEALS
					-											
					_				+							
20.a. CLAIMAN	T SIGNATU	RE												I		b. DATE
c. REVIEWER'S PRINTED NAME d. REVIEWER SI					SIGNATURE						e. TELEPHONE NUMBER			f. DATE		
21.a. APPROVING OFFICIAL'S PRINTED NAME b. SIGNATURE											c. TELEPHONE NUMBER d. D			d. DATE		
22. ACCOUNTING CLASSIFICATION																
23. COLLECTION DATA																
						,		_								
24. COMPUTED	DBY	25. AUDITED BY 26. TRAVEL ORDER/ AUTHORIZATION POSTEI					27. RECEIVED (Payee Signature and Date or Ch						heck No.)	neck No.) 28. AMOUNT 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 "<u>Blanket Routine Uses</u>" 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: <u>http://dpclo.defense.gov/privacy/SORNs/component/dfas/preamble.html</u>.

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 - A
Government Transportation		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	- AD	Leave En Route - LV
Authorized Return	- AR	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.