DD Form 1351-2
Travel Voucher Instructions

DFAS Rome TDY Travel Pay
Last Update: February 10, 2022
The DD Form 1351-2 (May 2011) is the primary form used to record travel itineraries and claim expenses for government travel. The following is a step-by-step guide with examples to ensure that you are filling the form out correctly. The numbers listed below correspond to the numbers shown in the blocks on the DD 1351-2.

If you have not already done so, please login into your MyPay account to set up your EFT account information. This will ensure timely direct deposit of funds into your account.

- **Block 1: PAYMENT** -
  - Select Electronic Funds Transfer (EFT)
  - **SPLIT DISBURSEMENT** (if necessary) – Check the box and indicate how much of your total entitlement you would like to be paid directly to your Government Travel Charge Card (GTCC). Please make sure that the split amount adequately covers charges you’ve placed on your credit card.

- **Block 2: NAME** - Enter your last name, first name, and middle initial.

- **Block 3: GRADE** - Enter your current rank or grade.

- **Block 4: SSN** - Enter your complete nine-digit social security number.

- **Block 5: TYPE OF PAYMENT** –
  - Select TDY
  - Select Member/Employee

- **Block 6a-d: ADDRESS** – Enter your most current mailing address.

- **Block 6e: E-MAIL ADDRESS** - Your e-mail address will be our primary means of communication in the event we have any questions about your travel claim or corrections need to be made. Enter an e-mail address you will be able to access while TDY and at home.
  - **IMPORTANT**: If no update is received, please check your junk email inbox and/or add dfas.rome.jft.mbx.iatssummary@mail.mil to your safe sender list.
Block 7: DAYTIME TELEPHONE NUMBER AND AREA CODE - Provide the best number for any questions/concerns pertaining to your voucher. Ensure the area code is included; if DSN, please indicate DSN before the phone number.

Block 8: TRAVEL ORDER/AUTHORIZATION NUMBER – This number is located on the upper left hand corner of your orders, if TCS orders, or from Box 22 of your DD Form 1610.

Block 9: PREVIOUS GOVERNMENT PAYMENTS/ADVANCES - Have you received any advances or other payments for the specific TDY trip you are filing this claim for? If so, write the amounts in this box. If not, or if you are unsure, leave this box blank.

Blocks 10a-e: FOR D.O. USE ONLY -
  o IMPORTANT - Block 10d can be used to indicate annual leave taken while on TDY travel. If used please enter the dates of your leave and indicate type of leave. Example: “Annual Leave, [Day(s), Month, Year].”

Block 11: ORGANIZATION AND STATION - Write in your unit or organization name.

Block 12 and Block 13: Leave Blank; dependents are not authorized on TDY.

Block 14: HAVE HOUSEHOLD GOODS BEEN SHIPPED - TDY travel rarely involves shipment of household goods, so this box can usually be marked “No”.

Block 15a: DATE - Enter the full year in which the travel began even when the travel crosses into the next calendar year.

Block 15b: PLACE - Each box in this section should only have one location per box. Enter every stop to/from your temporary duty location and home using the “DEP” and “ARR” rows to ensure you are paid correctly for all stops, including overnight stays while en route.
  o It is imperative that you return to your permanent duty station (PDS) or home of record (HOR) by the final day on your travel order.
• Block 15c: MEANS/ MODE OF TRAVEL - Indicate the two-digit form of transportation you used en route to the PLACE listed in 15b.

<table>
<thead>
<tr>
<th>First Digit:</th>
<th>Second Digit:</th>
</tr>
</thead>
<tbody>
<tr>
<td>T - GTR/TKT or CBA</td>
<td>A - Automobile</td>
</tr>
<tr>
<td>G - Government Transportation</td>
<td>M - Motorcycle</td>
</tr>
<tr>
<td>C - Commercial Transportation (Own expense)</td>
<td>B - Bus</td>
</tr>
<tr>
<td>P - Privately Owned Conveyance (POC)</td>
<td>P - Plane</td>
</tr>
<tr>
<td></td>
<td>R - Rail</td>
</tr>
<tr>
<td></td>
<td>V - Vessel</td>
</tr>
</tbody>
</table>

• Block 15d: REASON FOR STOP –The second page of your DD Form 1351-2 lists the “reasons for stop” under the instructions section. Please note that for TCS orders, the “reason for stop” is limited to the following:
  - AD – Authorized delay, for layovers while en route to the AOR. You are authorized up to 14 days in active duty (AD) status. Beyond that, you need an amendment authorizing any additional time.
  - TD – Temporary Duty, for the TD location(s) authorized in your orders.
  - MC – Mission Complete, for the date you return to your PDS or HOR.
  - AT – Awaiting transportation (less than 24 hours)
  - LV – Leave, enter Emergency Leave or Funded Environmental and Morale Leave (FEML).

• Block 15e: LODGING COST – If your trip involved an overnight stay with lodging costs for the PLACE entered in block 15b, enter the amount in this space.
  - A lodging receipt or a Statement in Lieu of Receipt must be included to receive reimbursement.
    - lodging name and address
    - your name
    - check-in/check-out dates
    - the means of payment (VISA, Mastercard, etc...)
    - dollar amount with charges itemized
    - a zero balance (proof that you paid for your entire stay)
  - Lodging or room taxes are claimed separately as a reimbursable expense in block18.

• Block 15f: POC (Personal Occupancy Conveyance) MILES – If you drove to the TDY location enter the number of miles from HOR to the TDY location. If you drove to the airport enter the number of miles to the airport. Once TDY is complete ensure miles are entered back to HOR.
• Block 16: POC TRAVEL -
  o Select Own/Operate if driving your own vehicle or fully paying for the vehicle expenses. Please note, you must check the box before “Own/Operate” to be reimbursed for the POC miles you list in column 15f.

• Block 17: DURATION OF TRAVEL - Check the approximate duration of your TDY travel. If travel was less than 12 hours, you will not receive per diem for that day. If it is between 12-24 hours, you will receive partial per diem. If more than, 24 hours you will receive full Per Diem.

• Block 18a-d: REIMBURSABLE EXPENSES - This is an itemized list for incurred expenses, such as airline tickets, rental car, fuel, public transportation, taxi fare, excess baggage, etc. Claimed expenses must have been incurred during the period of actual TDY travel.
  o Please do NOT list meals in this area. Meals will automatically be calculated based on your orders.
  o Block 18d - Leave blank. If necessary, the supervisor or resource manager will enter adjustments.
• Block 19: GOVERNMENT/DEDUCTIBLE MEALS – You may be entitled to the local commercial rate for meals but may be required to dine in a dining facility (DFAC) or other government facility during your stay. If so, enter the date and number of meals you purchased at the dining facility.

• Block 20a: CLAIMANT SIGNATURE - the person whose name is listed in block 2 is considered the “Claimant” and MUST either wet sign or digitally sign in this box.

• Block 20b: DATE - must include day, month and year to be considered valid.

• Block 20c: REVIEWER’S PRINTED NAME the reviewer is responsible to validate the DD1351-2 is completed correctly and the information is accurate. This person may be your supervisor or your commander.

• Block 20d: REVIEWER’S SIGNATURE either digitally or a wet signature is required.

• Block 20e: TELEPHONE NUMBER of the Reviewer listed in 20c.

• Block 20f: DATE of SIGNATURE - The Signature date should be on or after the date of the Claimant’s signature. Must include day, month and year to be considered valid.

• Blocks 21a-d: An Approving Official signature is only required if authorizing an entitlement not included on the orders. He/she is attesting to the validity of, and approving payment for any additional items not originally authorized on the orders. There must be a remark in the remarks section (Block 29) explaining what additional items are being approved. The signature date MUST be on or after the Mission Complete (MC) Date if not, the claim will be returned.

**IMPORTANT**: Blocks 22-28: Leave blank, these blocks are for the Finance and Accounting Office use only.
• Block 29: REMARKS (located on bottom or reverse): Enter any additional information, as applicable.

• Claim items authorized by the Authorizing Official (Block 21-a) in this space, or for leave dates as needed. (If NOT annotated in Block 10). If additional space is needed, please use the DD1351-2C (continuation sheet) and include with the DD1351-2.