



RF REQUEST TO TRAVEL FORM

Please allow at least **Three weeks** for processing of Travel

DATE October 7, 2024 Req. No: **55555-01T**

For Reimbursement of travel expenses, travel voucher and receipts must be submitted to the RF Procurement Office within 30 days of returning.

Request confirmed & initialed by Physical Plant Staff

TRAVELER Rudy Roo **Phone #** -5555

Forward completed form directly to Physical Plant - DO NOT use separate form for vehicle reservations. Physical Plant staff will forward Travel Request Form to the RF Travel Office at SUNY Canton after scheduling and confirming vehicle registration.

DESTINATION: New York City

Departure date & time.

PURPOSE OF TRIP (Attach Documentation)

Conference

Car	0.45		12 pass. van
			0.55
			With others

Yes

Mini van 0.45

DEPARTURE: Date: 7/1/2024 Time: 8:00 a.m.

Lens Approved (license on file) No Yes

RETURN: Date: 7/2/2024 Time: 7:00 p.m.

Rental Car E-Z Pass No Yes

State Vehicle ONLY. NOT claiming additional expenses.

Personal car- record estimated miles below

ESTIMATED EXPENSES: List Estimated \$ Amounts

***Lodging**

No Yes Prepaid on RF P-Card Confirmation #

I choose to be reimbursed later # Nights 1

at (rate) **\$ 220.00**

Hotel information: Holiday Inn New York City 585 8th Avenue Fed. I.D.: Tax Exempt certificate ST-129

City/State: New York, NY Zip Code 10018 **\$ 220.00**

***Meals**

Per Diem Rate No Yes Reimburse per diem

# Breakfast	at	# Dinner	at	Paying with RF P-Card	
<u>2</u>		<u>2</u>		<u>\$63.00</u>	
				<u>\$0.00</u>	\$ 158.00

***Registration/Conference Fee(s)**

Registration Fee information: NY Conference Registration Pre-registered with RF P-card on RF Award

Payee: NY Conference Registration Please register me & pay fee by check

Fed. I.D.: XXXXXXXXXX

Address: 414 8th Avenue Reg. Fee Amount: **\$ 90.00**

City/State: New York, NY Zip Code 10018 **\$ 90.00**

***Personal Car Mileage**

Estimated mileage at rate **\$ 0.670** **1/1/24 - 12/31/24* **\$ -**

State Vehicle Mileage - Physical Plant approval required.

Destination of State Vehicle 252 estimated miles **\$ 0.450** **\$ 113.40**

Airfare I have pre-paid with RF P-Card 398.11 **\$ 398.11**

***Other**

Parking	\$25.00	Tolls	\$10.00	Taxi	\$50.00	\$0.00	\$ 85.00
Baggage	\$50.00	Internet	\$0.00	Taxes	\$0.00	\$0.00	\$ 50.00

P.I. : Check here if a CASH ADVANCE is required. Cash advance will be 80% of estimated expences

PATEO	<u>5555555</u>	<u>1</u>	<u>55555</u>	PATEO	TOTAL:	\$ 1,114.51
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I Certify: This travel is for RF business. I have read the vehicle policy and accept all driver responsibilities as stated in that policy. I authorize office of Physical Plant to verify my Driver's License information utilizing the DMV Lens program to determine my eligibility to drive a college owned/leased vehicle.

SIGNATURES:		SIGNATURE INSTRUCTIONS:	
Traveler/ Driver:		All travelers must sign	
P.I.			
Grants Office			
Operations Manager			
Area V.P.		Only for out of state travel	Revised 1/24