TRAVEL VOUCHER OR SUBVOUCHER form					form	n. Use typewriter, ink, or ball point pen. PRESS HARD. DO NOT use pencil. If more space eeded, continue in remarks.										
1. PAYMENT SPLIT DISBURSEMENT: The Paying Office will pa					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											
designate a payment that equals the			the total of thei	loughing, and rental can if you are a continual employee, thesis you elect a different amount. Whilliany personner are required to total of their outstanding government travel card balance to the GTCC contractor. is only necessary when a GTCC is used while on official travel for the Government.												
Note: A spin disbursement is only necessary with						•	nt directly to the Government Travel Charge Card contractor:									
2. NAME (Last, First, Middle Initial) (Print or type) 3. GRA					ADE	4. S	SN			5. TYPE OF PAYMENT (X as applicable)						
, , , , , , , , , , , , , , , , , , , ,									TDY			Member/Employee				
6. ADDRESS. a. NUMBER AND STREET b. CITY					c. STATE d. ZIP CODE		PCS		П	Other						
											Deper	ndent(s)	П	DLA		
e. E-MAIL ADDRESS						-		-1		10. FOR D.	O. USE ONLY					
7. DAYTIME TELEPHONE NUMBER & 8. TRAVEL ORDER/AUTHORIZATION NUMBER					9. PREVIOUS GOVERNMENT PAYMENTS/ ADVANCES				a. D.O. VOUCHER NUMBER							
11. ORG	NIZAT	ION AND S	TATION										b. SUBVOL	JCHER NUMBER	₹	
12. DEPE	NDENT	(S) (X and o	complete as ap	oplicable)				13. DEPE	NDENT	S' ADI	DRESS ON REC	CEIPT OF	c. PAID BY			
ACC	OMPA	VIED		UNACC	COMPAN	IIED		ORDE	RS (In	clude Z	Zip Code)		C. PAID BT	1711001		
a. NAI	иЕ (La	st, First, Mid	dle Initial)	b. RELATIO	NSHIP	c. DATE OF OR MARK	BIRTH	1								
						0111111111		1								
								1								
								14 HAVE I	IOUSE	ם וסו	GOODS BEEN	SHIDDENS	2			
								(X one)		IIOLD	GOODS BLEN	SI II F E D :	d. COMPUTATIONS			
							YES NO (Explain in Remarks)			emarks)						
15. ITINE	RARY							c. MEANS/	RFA	l. SON	e.	f.				
a. DATE		b. PLAC	CE (Home, Offi City a	ice, Base, Acti and Country, e		and State;		MODE OF TRAVEL	FO	DR	LODGING COST	POC MILES				
	DEP															
	ARR															
	DEP															
	ARR DEP															
	ARR															
	DEP															
	ARR DEP															
	ARR															
	DEP ARR					e. SUMMARY OF PAYMENT										
	DEP												(1) Per Diem (2) Actual Expense Allowance			
	ARR								С,				(3) Mileage	<u> </u>	ce	
16. POC				OPERATE		PAS	SENGE	ER		17. DL	JRATION OF TR	RAVEL	(4) Depend	ent Travel		
18. REIMBURSABLE EXPENSES a. DATE b. NATURE OF EXPENSE c. AMOUNT			LINIT	d. ALLOWED 12 HOURS OR LESS			(5) DLA (6) Reimbursable Expenses									
a. DATE			NATORE OF	LXI LIVOL		C. AIVIO	0111	d. ALLOV		N	MORE THAN 12	HOURS	(7) Total	I Sable Expenses		
									BUT 24 HOURS OR LESS		(8) Less Ad					
									MORE THAN 24 HOURS			(9) Amount (10) Amour		+		
										19. GC	OVERNMENT/D	EDUCTIBLE	` '			
											a. DATE	b. NO. O	F MEALS	a. DATE		b. NO. OF MEALS
20.a. CLAIMANT SIGNATURE												b. DATE				
c. REVIEWER'S PRINTED NAME d. REVIEWER S					SIGNATURE				e. TELEPHONE NUMBER f. DATE		f. DATE					
21.a. APPROVING OFFICIAL'S PRINTED NAME b. SIGNATURE									c. TELEPHONE NUMBER d. DATE							
22. ACCOUNTING CLASSIFICATION																
23. COLL	ECTIO	N DATA														
24. COMPUTED BY 25. AUDITED BY 26. TRAVEL OF AUTHORIZ			RAVEL ORDEI UTHORIZATIO		27. RECEIVED (Payee Signature and Date					e or Check N	lo.)	28. AI	MOUNT 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 1

5c. MEANS/MODE OF TRAVEL (Use two letters)

GTR/TKT or CBA (See Note)	- T	Automobile	- A
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 - 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.