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|  | | | | | | | **Comptroller General’s Office** | | | | | | | | | | | | | | | Agency Number | | | | | |  | | |
|  | | | | | | | Travel Support Document | | | | | | | | | | | | | | |  | | | | | | | | |
| Name | |  | | | | | | | | | | ZEMP# or Vendor# | | |  | | | | | | | | | Date | | | |  | | |
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| Meals & Subsistence Are | | | | | | Reportable In or Out of State | |  | | | | | 51520000 |  | | | | | | | | | 51510000 | |  | | | | 21440000 |  |
| Reportable as Income if There | | | | | | Non-Reportable --- In State | | 1 | | 50040000 | 10720000 | | 50010000 | 50020000 | | | 50030000 | | 50050000 | | 50060000 | | 50080000 | | 50070000 | | | | 21430000 |  | |
| Was No Overnight Stay Involved | | | | | | Non-Reportable --- Out of State | | 2 | | 50540000 | 10720000 | | 50510000 | 50520000 | | | 50530000 | | 50550000 | | 50560000 | | 50580000 | | 50570000 | | | | 21430000 |  | |
| DATE  MO/DA | DEP | | TIME | | AM | Destination Of Travel  Departure Destination Return | | 1  or  2 | | Auto  Miles | Per  Diem | | Meals | Lodging | | | Air  Trans | | Other  Trans | | Misc  Travel  Expense | | Subsist  Allow | | Regist  Fees | | | | Nonstate  Employee Travel | TOTAL |
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| I hereby certify or affirm that the above expenses were actually incurred by me as necessary traveling expenses in the performance of my official duties; any meals or lodging included in a conference or convention registration fee have been deducted from this travel claim, and that this claim is true and correct in every material matter and conforms with the requirements of state laws, rules and regulations.  Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | |  | |  |  | | 51520000 |  | | |  | |  | |  | | 51510000 | |  | | | | 21440000 | Total |
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| **Travel Support Document** | | | | | | | | | **NOTE:** The 1st two digits (50) of each GL have been omitted  Travel Advance (52010000) $ | | | | | | | | |  | | | | | | | |  | Grand Total | | |  |