

<b>STAFF TRAVEL</b>	<b>TRAVEL EXPENSE REPORT</b> <b>NATIONAL OPTICAL ASTRONOMY OBSERVATORY</b> <small>OPERATED BY AURA, INC. UNDER COOPERATIVE AGREEMENT</small>  <small>WITH THE NATIONAL SCIENCE FOUNDATION</small>	PROGRAM
<b>COMMITTEE/VISITOR</b>		DATE PREPARED
<b>RECRUITMENT</b>		TRAVEL REQUEST NUMBER <b>T</b>
<b>RELOCATION</b>		
<b>OTHER</b>		

<b>NAME/ADDRESS</b>
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MAIN TRAVEL POINTS		
FROM	TO	DATE

**STATEMENT OF EXPENSES INCURRED TRAVELING ON OFFICIAL BUSINESS**

1. SHOW ROUND-TRIP FARE INCLUDING PULLMAN ACCOMODATIONS - ATTACH RECEIPTS - INCLUDE FEDERAL TRANSPORTATION TAX
2. LIST HOTEL CHARGES AND RATE PER DAY - ATTACH RECEIPTS
3. SHOW MEALS AS A DAILY TOTAL ITEM
4. ITEMIZE LONG DISTANCE TELEPHONE AND TELEGRAPH CHARGES - SHOWNAME OF PERSON CONTACTED
5. SHOW POINT-TO-POINT MILEAGE ONLY
6. ITEMIZE TAXI AND LIMOUSINE FARES - SHOWING START AND FINISH
7. EXPLAIN ANY J-K-L IF APPLICABLE ON BACK - PLUS ANY ABOVE ITEMS REQUIRING EXPLANATION

DESCRIPTION	MONTH / DATE									TOTAL
A. LODGING - ATTACH RECEIPT										
B. MEALS										
C. AIRFARE (CASH) - ATTACH RECEIPT										
D. AUTO RENTAL										
E. TAXI/LIMOUSINE										
F. MILEAGE-PERSONAL AUTO (\$.585/mile)										
G. PARKING										
H. GRATUITIES										
I. TELEPHONE & TELEGRAPH										
J. CONFERENCE EXPENSE										
K. OTHER										
L. OTHER										
<b>TOTAL</b>										

<b>EXPENSES TO BE PAID DIRECTLY BY NOAO</b>	ADVANCE FOR TRIP
AUTO \$ _____ AIRFARE \$ _____ HOTEL \$ _____ OTHER \$ _____ <small>(specify)</small>	AMOUNT DUE AURA
UNUSED TICKET FOR REDEMPTION ATTACHED <b>YES</b> <b>NO</b>	AMOUNT DUE TRAVELLER

I HEREBY CERTIFY THAT ALL EXPENDITURES LISTED HEREON ARE TRUE AND CORRECT AND WERE NECESSARY TO ACCOMPLISH THE OBJECTIVES OF THE TRIP

\_\_\_\_\_  
SIGNATURE

ACCOUNT NUMBER	AMOUNT	

DEPT. HEAD _____ PROGRAM DIRECTOR _____ BUSINESS OFFICE _____ DIRECTOR _____	APPROVAL SIGNATURE _____      DATE _____  APPROVAL SIGNATURE _____      DATE _____  APPROVAL SIGNATURE _____      DATE _____  APPROVAL SIGNATURE _____      DATE _____
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