

STAFF TRAVEL	<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
COMMITTEE/VISITOR		DATE PREPARED
RECRUITMENT		TRAVEL REQUEST NUMBER <b>T</b>
RELOCATION		
OTHER		

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

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

A. Lodging. Attach Receipt. List hotel charges and rate per day.  
B. Meals and Incidentals. Meals and incidentals are paid on a per diem basis. For rates within the US, go to the GSA Website. For rates outside of the US, go to the DOD Website. For a definition of Meals and Incidentals, please refer to the Meals and Incidental Expenses section of the Travel Policy FAQs.  
C. Airfare. Attach Receipt. Show roundtrip fare including federal transportation tax.  
D. Auto Rental. Attach Receipt.  
E. Taxi/Limousine. Attach Receipt. Itemize taxi and limousine fares--showing start and destination. Do not include items classified under Meals and Incidentals. Please refer to the Meals and Incidental Expenses section of the Travel Policy FAQs.  
F. Mileage/Personal Auto. Attach document showing driving directions and point-to-point mileage.  
G. Parking. Attach Receipt.  
H. Communication. Attach Receipt. Expenses for Telephone, Internet, etc.  
I. Conference Expense. Attach Receipt. Registration fees.  
J. Other. Attach Receipt(s).  
K. Items With No Receipt. You must complete a Missing Receipt Form

DESCRIPTION	MONTH / DATE									TOTAL
A. LODGING										
B. MEALS AND INCIDENTALS										
C. AIRFARE										
D. AUTO RENTAL										
E. TAXI/LIMOUSINE										
F. MILEAGE-PERSNL AUTO (\$0.58/mile)										
G. PARKING										
H. COMMUNICATION										
I. CONFERENCE EXPENSE										
J. OTHER										
K. ITEMS WITH NO RECEIPT										
<b>TOTAL</b>										

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

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

\_\_\_\_\_ SIGNATURE \_\_\_\_\_ DATE

<b>ACCOUNT NUMBER</b>	<b>AMOUNT</b>	
		APPROVAL SIGNATURE _____ DATE _____
		DEPT. HEAD _____
		PROGRAM DIRECTOR _____
		BUSINESS OFFICE _____
		DIRECTOR _____

Travel Policy FAQs: <http://www.noao.edu/noao/forms/travelexpense/documents/Travel%20Policy%20FAQs.pdf>  
GSA Website: <http://www.gsa.gov/portal/category/21287>  
Missing Report Form: <http://www.noao.edu/noao/forms/travelexpense/documents/Travel%20missing%20receipt%20form.doc>