



REQUEST FOR REIMBURSEMENT OF TRAVELING EXPENSES
(Note the Travel Regulations on Reverse Side)



DARLENE GREEN
Comptroller

DATE 12 June 2015

212 City Hall
St. Louis, MO.

Name Tishaura O Jones
 Trip To: New York & France
 Purpose: Manufacturing review with Xerox & Parkeon

Department _____ No. _____
 Method of Travel: _____
 Prior Approval By: _____

Leave St. Louis
 Arrive New York
 Convention/Meeting Commencement _____
 Convention/Meeting Adjournment _____
 Leave New York
 Arrive St. Louis

Time	Day/Date
<u>1:05 PM</u>	<u>Monday 6/1/15</u>
<u>4:33 PM</u>	<u>Monday 6/1/15</u>
_____ M	_____
_____ M	_____
<u>12:25 PM</u>	<u>Sunday 6/7/15</u>
<u>2:05 PM</u>	<u>Sunday 6/7/15</u>

Enter Expenses in Appropriate Date Column, Indicate "A" for Meals Served by Airline, "R" for Meals Provided by Registration

Date	Day/Date	Day/Date	Day/Date	Day/Date	Day/Date	Day/Date	Day/Date	Day/Date	TOTAL
	6/1	6/7							
Fare	471.20								471 20
Registration									
Limo - To Airport		47-							47 -
Limo - From Airport	61-								61 -
Breakfast									
Lunch									
Dinner									
Hotel									
Other:									
TOTAL	532.20	47							579 20

REMARKS:

France leg was on my own. New York stays were meetings with Xerox

Less Advance	
Less Registration	
Less Prepaid Fare	471 20
Amount Due	108 -
Charge to Account No.	5645000 <i>OK</i>

I certify that the above is a true and accurate accounting of my expenses.

APPROVED:

(Signature) Tishaura O Jones (Date) 6/12/15
 (Department Head) _____ (Date) _____
 COMP-34 (Rev. 6/01ML)

(Deputy Comptroller-Federal Grants) _____ (Date) _____
 (Comptroller) _____ (Date) _____

Model for Shilpa
Model on 5/11/15

TRAVEL REQUEST

(Note the Travel Regulations on Reverse Side)

Date: 7 May 2015

Name Fishawna O Jones Title Treasurer Dept. FISCAL Dept. No. 343

Destination: City New York State NY

Purpose: Meeting w/ Parkson - Meter Inventory Assessment

Convention/Meeting: Commencement Time _____ AM _____ PM Day/Date _____
Adjournment Time _____ AM _____ PM Day/Date _____
(Enclose a copy of Convention/Seminar/Meeting announcement with request).

PROPOSED ITINERARY

Departure Time: 105 AM/PM Day/Date Mon 6/1/15

Arrival Time: 433 AM/PM Day/Date _____

Departure Time: 1225 AM/PM Day/Date Sun 6/7/15

Arrival Time: 205 AM/PM Day/Date _____

TRIP EXPENSES TO BE PAID BY:

a) City Funds _____ b) Special Funds X

Account No. 5445000 Account Title TRAVEL

Trip to Paris will be on my own. Requesting approval to meet representative from Xerox in New York & lay over on the return. Also requesting incidentals for Paris.

Method of Travel: Air Rail _____ Bus _____ Private Auto _____ City Car _____
Indicate One-Way/Mileage If Traveling By Auto _____

ESTIMATE OF TRIP EXPENSES

Air Coach Fare \$ 471.20 Limousine \$ TBD

Hotel @ _____ Night \$ _____ Others \$ _____

*Registration \$ 0 Total \$ 471.20

*Food \$ TBD

*Indicate below meals covered by Registration Fees:

Breakfasts _____ Lunches _____ Dinners _____

Airline Tickets Required (Prepaid Fare) Yes _____ No _____

Advance payment approved: \$ N/A

APPROVED: _____ (Division Head) _____ (Date) _____ (Federal Grants) _____ (Date)

APPROVED: Fishawna O Jones (Department Director) 5/7/15 (Date) APPROVED: _____ (Comptroller) _____ (Date)