



REQUEST FOR REIMBURSEMENT OF TRAVELING EXPENSES

(Note the Travel Regulations on Reverse Side)



DARLENE GREEN DATE 6-1-2018
Comptroller

212 City Hall
St. Louis, MO.

Name Tishaura Jones Phone 314.622.3434 Dept. Parking No. 343

Trip To: New York Method of Travel: Air

Purpose: Business - Smart Cities Conference Prior Approval By: _____

Guest Speaker _____

Leave St. Louis 8 : 30 AM PM Tuesday, May 8, 2018

Arrive New York/Newark, NJ 11 : 50 AM PM Tuesday, May 8, 2018

Convention/Meeting Commencement _____ : _____ AM PM _____

Convention/Meeting Adjournment _____ : _____ AM PM _____

Leave New York/Newark, NJ 6 : 35 AM PM Thursday, May, 10, 2018

Arrive St. Louis 8 : 25 AM PM Thursday, May 10, 2018

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	Day/Date	TOTAL
Fare										0
Registration										0
Limo - To Airport										0
Limo - From Airport										0
Breakfast										0
Lunch										0
Dinner										0
Hotel										0
Other:										0
										0
										0
										0
TOTAL	0	0	0	0	0	0	0	0	0	0

REMARKS:	Less Advance
Conference sponsored one (1) night at The Beekman Hotel	Less Registration
Room and breakfast covered. Remainder of the trip covered	Less Prepaid Fare
(personally) by Treasurer Jones. <i>Hotel covered by Smart cities.</i>	Amount Due 0.00
	Charge to Account No.

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

APPROVED:

Tishaura R. Jones 6-1-2018
(Signature) (Date)

(Deputy Comptroller-Federal Grants) (Date)

Tishaura R. Jones
(Department Head) (Date)

(Comptroller) (Date)



TRAVEL REQUEST (Review Travel Regulations)

Date: 4-20-2018

Name Tishaura Jones Title Treasurer

Office Telephone: 314.622.3434

Dept./ Section Parking

Dept. No. 343

Destination: City New York

State New York

Purpose: Business - Smart Cities Conference, Guest Speaker

The conference will sponsor one (1) night at The Beekman Hotel, located in Downtown Manhattan (Room and breakfast covered).

Convention/Meeting: Commencement Time 10:00 AM PM Day/Date Tues., May 10, 2018
 Adjournment Time AM PM Day/Date Tues., May 10, 2018
 (Enclose a copy of Convention/Seminar/Meeting announcement with request).

PROPOSED ITINERARY

Departure Time:	8:30	<input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	Day/Date	Tuesday, May 8, 2018
Arrival Time:	11:50	<input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	Day/Date	Tuesday, May 8, 2018
Departure Time:	6:35	<input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	Day/Date	Thursday, May 10, 2018
Arrival Time:	8:25	<input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	Day/Date	Thursday, May 10, 2018

Method of Travel: Air Rail Bus Private Auto City Car
 Indicate One-Way/Mileage if Traveling By Auto n/a

ESTIMATE OF TRIP EXPENSES

Air Coach Fare \$ TBD Limousine \$ 0.00
 Hotel @ 2 /Night \$ TBD Others \$ TBD
 *Registration \$ 0.00 Total \$ 0.00
 *Food \$ TBD

*Indicate below meals covered by Registration Fees:

1 Breakfasts Lunches Dinners

Airline Tickets Required (Prepaid Fare) Yes No

Advance payment approved: \$

Remainder of trip will be covered personally.

Account No. 5645000 Account Title TRAVEL

a) City Funds b) Special Funds X

APPROVED: (Division Head) (Date)

APPROVED: (Federal Grants) (Date)

APPROVED: Tishaura Jones (Department Director) 4-20-2018 (Date)

APPROVED: (Comptroller) (Date)