BD-100 (Rev.10/15ML) APPROVED: APPROVED: Account No. Departure Time Arrival Time: Arrival Time: Departure Time: Convention/Meeting: Commencement Time Name (Enclose a copy of Convention/Seminar/Meeting announcement with request), Purpose: Destination: Dept./ Section \_ TRAVEL REQUEST (Review Travel Regulations) Expenses partially covered by center for Popular Democracy & Treasurer Johns. Tishaura O. Jones a) City Funds \_ Speaking Engagement and Conference - Local Progress Annual Convening City Detroit Salvana Depons Parting Du 410 TRIP EXPENSES TO BE PAID BY: 810 1040 PROPOSED ITINERARY (Department Mrector) (Division Head) DA NA DA NA PAM PAM Account Title b) Special Funds Day/Date \_ Day/Date Day/Date Day/Date Saturday, 7/27/19 Wednesday, 7/24/19 PA N (Date) Day/Date\_ Wednesday, 7/24/19 THE APPROVED: APPROVED Treasurer Hotel @ Advance payment approved: \$ \*Indicate below meals covered by Registration Fees \*Food Airline Tickets Required (Prepaid Fare) \*Registration \$ Air Coach Fare \$ Indicate One-Way/Mileage If Traveling By Auto Method of Travel: Adjournment Time Breakfasts ESTIMATE OF TRIP EXPENSES State Dept. No. (Federal Grants) Air 🗆 Rail (Comptroller) K Date: 600 343 567.00 297.96 Office Telephone: PA ☐ Bus ☐ Private Auto ☐ City Car Yes Lunches Total Others Limousine Day/Date 314-622-3434 Saturday, 7/27/19 8 (Date) (Date) Dinners



## REQUEST FOR REIMBURSEMENT OF TRAV (Note the Travel Regulations on Reverse)

DAUG 0 7 2019	and the same of th
ELING EXPENSES	
rse Side)	
	AOLERS STATE

DARLENE GREEN DAT		ATE 8/6/19						212 City H		
Name_Tishaura O. Jones			Phone	314-622-343	34	P1	W	St. Louis,	2)472	
Detroit				hod of Trav		anna		No		
Purpose: Speaking Enga	gement and	Conference							~	
Local Progress Annual Convening		Prior Approval By:					<i>I</i> '			
			Time				Date			
Leave St. Louis			***************************************		8	10 ■ AM	Wedne	Wednesday,, 7/24/19		
Arrive_DTW					10:	40 ■ AM				
Convention/Meeting Commencement			3.	30 □AM	Wedne	Wednesday,, 7/24/19				
Convention/Meeting Adjournment					6 00 DAM Saturday, 7			ay,,7/27/19	,7/27/19	
Leave_DTW					4. 10 DAM Saturday, 7/27/19			ay,, 7/27/19		
Arrive St. Louis				***********	4	45 □AM				
Enter Expenses in App	opriate Dat	e Column,	Indicate	"A" for Meal.	Served by		" for Meals	Provided by	r Donintenti	
	Day/Date	Day/Date	Day/Dat	e Day/Date	Day/Date	Day/Date	Day/Date	Day/Date	TOTAL	
Date 🖙	7/24	7/25	7/26	7/27/						
Fare	297.96								297,96	
Registration	60.00								60	
Limo - To Airport				66.61	Poud	Ather			66.61	
Limo - From Airport	40.17	Paid is	the	(6)	- Shep				40.17/	
Breakfast		Compa	my co			,			0	
Lunch									0	
Dinner									0	
Hotel				877.40					877.4	
Other::									0	
									0	
									0	
									0	
TOTAL.	398.13	0)		0 944.01	0	0	0	0	1342.14	
REMARKS:	•						170	Advance	1542.14	
Hotel and airfare partially	covered by	Center for F	Popular D	emocracy			Less Reg	istration		
and Treasurer Jones			Less Prepaid Fare				1,342.14			
								unt Due	0.00	
Charge to Account No							0.00			
certify that the above i accounting of my exper	s a true ar ises.	nd accura	te				PPROVE			
Signature) Signatura de	Zom		8/7/8	Date) (De	puty Comptro	ller-Federal C	Grants))		(Date)	
Department Head)	U		1 1	Date) (Co	mptroller))				(Date)	