

Complete Before Traveling

OTERO COUNTY

TRAVEL APPROVAL / ADVANCE REQUEST

FORM DATE: 7/1/2022

PAYEE (Please Print):	_____
Address:	_____
City, State Zip:	_____
DESTINATION:	_____
PURPOSE (Be Specific):	_____

Dept:	_____
GL Acct:	_____
TRAVEL BY:	
County Vehicle	_____
POV	_____
Airline	_____
Other (Explain)	_____

ANTICIPATED DEPARTURE			
DATE:	_____	FROM:	_____
TIME:	_____	TO:	_____
	_____		_____
ANTICIPATED RETURN			
DATE:	_____	FROM:	_____
TIME:	_____	TO:	_____
	_____		_____

OVERNIGHT TRAVEL REIMBURSEMENT TYPE	
PER DIEM	_____
ACTUAL EXPENSE	_____
OVERNIGHT TRAVEL ADVANCE (Select Applicable)	
YES	Pickup Ck _____
NO	Mail Ck _____

SIGNATURES:	
TRAVELER: _____	DATE: _____
DEPT HEAD OR COUNTY MANAGER: _____	DATE: _____

FINANCE USE ONLY				
ADVANCE PER DIEM CALCULATIONS		(OR)	ADVANCE ACTUAL EXPENSE CALCULATIONS	
# Days (In-State)	_____ \$155 _____		# Days Lodging	_____
# Days (Out-of-State)	_____ \$155 _____		# Days Meals (In-State)	_____ \$59 _____
# Days (Santa Fe)	_____ \$202 _____		# Days Meals (Out-of-State)	_____ \$59 _____
# Add'l Hours	_____		Transportation - Airfare (Coach Class Only)	_____
Other - _____	_____		Other - _____	_____
Total Estimated Expenses _____			Total Estimated Expenses _____	
Less: 20% Retainage _____			Less: 20% Retainage _____	
TOTAL ADVANCE PER DIEM PAYMENT	_____		TOTAL ADVANCE ACTUAL EXPENSE PAYMENT	_____
G/L ACCOUNT	AMOUNT		REVIEWER INITIALS & DATE:	_____
_____	_____		APPROVER INITIALS & DATE:	_____
_____	_____		COMMENTS:	_____
_____	_____			_____

All required information must be attached or travel advance may not be processed.