## **REQUEST FOR TRAVEL EXPENSE ADVANCE**

To: Gaines County Auditor				
Please issue a check in the amount of	f \$	to	(Print Name of Tra	
for a travel advance. Please break do authorized category. (Also attach the including number of days and rate most direct route to the conference more than 3 hours, per diem will be	e confere and a ma hotel. P	nce agenda, h p from Google er Diem rate is	uested for eac otel informat showing the \$65 a day. If	ch ion shortest, traveling
mileage (70 cents/mile),				
for which travel will commence on Charge the advance to (Depart	V	& Event Location) vith return on	(Budget Line Iten	
The undersigned understands that wit traveler must submit a County Expension the unused portion of the advance in the Treasurer and credit to the account chif such report is not submitted, whether entire amount of the advance shall be the County Expense Report, if and what though no expense advance was grant the account from which the advance we Request by:	se Report the form of arged. The or not the deducted nen it is evented. Such as debited.	complete with a f a check or cashe undersigned here is a balance of the travel of the from the travel of the payroll deduction.	all Receipts and the for receipt to for receipt to for the formal for the four the f	nd return by the stands that inty, the check and reated as
(Employee Signature)		(Official/Depar	tment Head Signatu	ıre)
(Date)			(Date)	
**Note: The expense advance policy related to conferences, schools or oth submit this form sooner than thirty wo (exception if the departure date is on a time for the prior court and the check before travel) and no later than 12:00 Court meetings when accounts payab may affect the deadline or the meeting	er events rking days a court da will be hel noon on t le are app	of several days so prior to the days te, then all pland in the Auditor he Tuesday beforoved. Holidays	duration. Ple te of departure ning should ta 's Office until to fore Commissi	ease do not e ake place ir the Friday ioners
FOR USE BY AUDITOR AND T				
Check number issued on Date expense report due:			#0	
Date expense report received and ver	ified corre		or	
this Authorization for Payroll Deductio further action on Date of:				surer for