PTRCF ADVISORY BOARD TRAVEL EXPENSE VOUCHER

NORTH DAKOTA INSURANCE DEPARTMENT-SPECIAL FUNDS DIVISION
PETROLEUM TANK RELEASE COMPENSATION FUND (PTRCF)
SFN 52864 (11-2016)

Name			Date Submitted
Address	City	State	ZIP Code

TRAVEL TIME	Date of Departure From Home	Time of Departure From Home ☐ AM ☐ PM	Date of Return To Home	Time of Return To Home ☐ AM ☐ PM

	IN NORTH DAKOTA				OUTSIDE NORTH DAKOTA					
MEALS	BREAKFAST $7.00	LUNCH $10.50	DINNER $17.50	SUB TOTAL	BREAKFAST * 20%	LUNCH * 30%	DINNER * 50%	SUB TOTAL		**TOTALS**
Number of Meals										
No. X Rate = Cost									Meals	$
LODGING	*ACTUAL COST UP TO $74.70/DAY PLUS STATE AND LOCAL TAXES*				*ACTUAL COST/DAY*					
	Rate X Days =				Rate X Days =				Lodging*	$
MILEAGE	Miles @$ =				Miles @$ =		Miles @$ =		Mileage	$

* Percentage of GSA Rate.
Continental U.S. = Applicable GSA Rate.
Canada, Alaska, Hawaii = Applicable rate for federal employees.
All other International Travel = Applicable rate for federal employees.

PER DIEM: _____ Days at $62.50

Commercial Transportation*	$
Taxi Fare*	$
Per Diem	$
Other*	$
TOTAL CLAIM	$

* Attach Receipts

Were meals included in registration fee? ☐ No ☐ Yes - Which?	Number of Breakfasts	Number of Lunches	Number of Dinners

Explanation of Travel and Other Costs

Signature

ATTACH COPY OF MEETING ANNOUNCEMENT

Agency Approval (Authorized Signature)	Date