## Southeastern California Conference of Seventh-day Adventists

## **Travel and Expense Report**

Rev. 01/2025

Name						
Address						
	TIONS AND INSTRUCTIONS					
	<ul> <li>Please report the actual miles driven under Mileage column. Current reimburse rate is</li> <li>When on approved SECC travel. Please input the correct amount under Per Diem column.</li> <li>Full Per Diem</li> <li>\$60.00 (employee paid for 1 meal a day, we provide ½ per diem rate (\$ employee paid for 2+ meals a day, we provide full per diem rate).</li> <li>When fully entertained</li> <li>Family authorized travel: Worker &amp; Spouse</li> </ul>					
Travel — Lodging —	Transportation other than by performed by performance.	Child \$30.00 rsonal vehicle.				
DATE	<b>DESCRIPTION</b> Activity, Location, or Destination	PERSONAL Mileage Per Diem	<b>TRAVEL</b> Airfare, Etc.	CAR RENTAL Parking, Tolls & Gas	LODGING	OTHER
Verify Total in Each Column						
			<u> </u>			. <u></u>
REQUESTE	D BY:			DATE:		
<b>GL Account</b> 11356	Special Travel	BELOW FOR OFFICE	USE ONLY			
33012 10500	A/R Deductions Moving Expense					
10500	Moving Allowance					

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Total Reimbursed

APPROVED BY: \_\_\_\_\_