Southeastern California Conference of Seventh-day Adventists

Travel and Expense Report

Rev. 01/2026

Name _____ Reporting Period _____

Address _____ Telephone _____

EXPLANATIONS AND INSTRUCTIONS

Mileage → Please report the actual miles driven under Mileage column. Current reimburse rate is .725

Per Diem → **When on approved SECC travel**. Please input the correct amount under Per Diem column.

Full Per Diem	$60.00 (employee paid for 1 meal a day, we provide ½ per diem rate ($30); employee paid for 2+ meals a day, we provide full per diem rate).
When fully entertained	$20.00 (employee did not purchase any meals for the day)
Family authorized travel: Worker & Spouse	$120.00
Each Child	$30.00

Travel → Transportation other than by personal vehicle.

Lodging → Actual lodging expense. **Hotel charge slip required**.

DATE	DESCRIPTION Activity, Location, or Destination	PERSONAL Mileage	 Per Diem	TRAVEL Airfare, Etc.	CAR RENTAL Parking, Tolls & Gas	LODGING	OTHER
	Total Mileage	0					
Verify Total in Each Column		$ 0.00	$ 0.00	$ 0.00	$ 0.00	$ 0.00	$ 0.00

REQUESTED BY: _____ **DATE:** _____

BELOW FOR OFFICE USE ONLY

GL Account #		
11356	Special Travel	_____
33012	A/R Deductions	_____
10500	Moving Expense	_____
10510	Moving Allowance	_____
_____	_____	_____
_____	_____	_____
	Total Reimbursed	_____

APPROVED BY: _____ **DATE:** _____