

# Huron County Employees

## Travel Notification

ORC 325.20 (A) and ORC 325.20 (B)

To be completed and submitted 14 days in advance, if possible, of travel away from the regular work site.

**Person traveling:** \_\_\_\_\_ **Date(s) traveling:** \_\_\_\_\_

**Department/office:** \_\_\_\_\_

**Traveling to:** \_\_\_\_\_ **Purpose:** \_\_\_\_\_

(Attach detail)

**Passengers/coworkers:** \_\_\_\_\_

I will be using a Huron County vehicle.

I will be driving my own vehicle. It is insured and I have a valid driver's license.

I will be using public transportation.

Other \_\_\_\_\_

**Travel will involve overnight accommodations.**

**Travel will involve reimbursable meal expense.**

Tips, tax, and alcoholic beverages are not reimbursable; shall not exceed \$ 30.00 per day; (Dinner \$16.00, \$ 8.00 lunch, \$ 6.00 breakfast)

**Other anticipated expenses.**

Personal telephone calls and entertainment are not reimbursable

**Total expense estimated**    A) to \$ 100.00    B) to \$ 500.00    C) \$ 500.00+

Attach detail

Approved \_\_\_\_\_

Denied \_\_\_\_\_

**Authorized by:** \_\_\_\_\_

**Signed** \_\_\_\_\_ **Date** \_\_\_\_\_

A copy of this form will be retained at the Commissioners' office filed under: **Insurance / Business Travel**

Form 11.24    01/11/01