State of Ohio

TRAVEL EXPENSE REPORT

Note: The traveler is required by Rule 126-l-02 of the Administrative Code to provide all information requested on the form as well as receipts and other relevant information required by the employing agency or the Office of Budget and Management. Your report will be used to determine your eligibility for reimbursement of actual travel expenses. In addition, the report is subject to an audit and may be used in any inquiry or action involving your reimbursement or advance of travel expenses. The information you provide in the report will be entered into the state's Central Accounting System where it generally becomes a public record.

Traveler's Name		Bargaining Unit
Title	Home Address (Number, Street, City, Zip)	Social Security Number
Department, Office, or Institution Name	Headquarters (City & County)	Type of Travel ☐ In-State ☐ Out-of-State / Regular Working Hours A.M. to P

19 ___ Mo/Day	ITINERARY TRAVEL POINTS	TIME		LIVING EXPENSE Meals	Lodging	Taxes	Total	TRANSPORTATION EXPENSE AUTO Type	Miles	COMMON CARRIER Mode	Amount	OTHER	MISCELLANEOU Services & Spec. Purch.	Conferen Meals
	FROM	DEP												
	To	ARR												
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MO./DAY	NAMES OF OTHER STATE EMPLOYEES TRAVELING IN SAME CAR	EMI'LOYING AGENCY

Column Totals	$ (A)		$ (B)	$ (C)	$ (D)	$ (E)
This Report: Total Personal Vehicle Mileage: . ¢ = Total Personal Auto Mileage Allowance						(1)
Total Living, Common Carrier, Other and Miscellaneous Expenses Columns (A) & (B) & (C) & (D) & (E)						(2)
Total Reimbursement Claimed (Block (1) Plus Block (2))						(3)

TRAVELER'S CERTIFICATE

I certify that the expenses identified in this report are limited to those which I actually incurred on state business and that these expenses meet the requirements of Rule 126-l-02 of the Administrative Code or applicable collective bargaining contract. In the event that I am driving a privately owned motor vehicle on state business, I also certify that I am insured under a policy of liability insurance meeting the requirements of Section 4509.51 of the Revised Code.

TRAVELER'S SIGNATURE	DATE	APPROVED BY: (Signatures)	D

OBM 7148 (Rev. 2/95)

Distribution: White—Originating Agency Canary-State Accounting Pink-Business Office (if needed) Goldenrod-Traveler