

TRAVEL ID#: T16158

City of Naples, Florida
Travel Report Form



Name of Traveler: Reg Buxton Department: City Manager/Mayor & Council
 Purpose of Travel: FL League of Cities - Annual Conference Destination (City and State): Hollywood, FL
 Departure Date and Time: Wednesday August 17, 2016 - 5pm Return Date and Time: Sunday August 21, 2016 - 11am

Account(s) to be charged: 001-01-01-511-540000

Instructions: Complete first column with estimated costs prior to travel and submit to Finance for pre-audit prior to committing any travel funds. Complete second two columns with actual amounts after travel. Submit to Finance within 14 days of return.		Estimated Total	To be reimbursed	City Credit Card or Check
Registration Fee	<u>\$650</u> (includes <u>\$125</u> fee for guest to be paid to City by Reg)	\$650.00 ✓	<u>OK 1830</u> <u>8.22.16</u>	\$650.00 <u>\$25.00</u>
Lodging	\$ 182 Per night X <u>2</u> nights - <u>cancelled 1 night</u> Plus 215 per night x 1 night as contracted rate rooms were sold out - this was verbally approved by B. Moss. Name of Establishment: Diplomat Resort & Spa, Hollywood	546 + 215 = total of \$761.00 ✓		\$761.00 <u>579.00</u>
Meals Reimbursement not to exceed the amounts shown	Breakfast: \$ 6 per day X <u>3</u> Days = \$24.00 <u>16.00</u> Lunch: \$11 per day X <u>3</u> Days = \$33.00 Dinner: \$19 per day X <u>3</u> Days = \$57.00 TOTAL = \$114.00 Meals are no longer reimbursable when travel does not include an overnight stay.	114.00 ✓	114.00 * \$16 pd back to city	
Transportation	City Car (Estimate gas) ___miles/___Mpg @\$___/gal Private Owned Vehicle (POV) .445 rate /mile X <u>227</u> miles (.445 rate/mile beginning June 9, 2016) Other (explain) _____	\$101.02 ✓	101.02 ✓	
Incidental Expenses (such as taxi, tolls, parking, telephone)	Please Specify: tolls, and self-parking - 26.00/night w/ motel Receipts are needed for reimbursement.	\$104 plus toll expenses ✓		
TOTAL		\$1730.00 ✓	<u>209.02</u>	<u>1104.00</u>
		Less Travel Advance	<u>215.02</u>	
		Amount Due to (Circle One): City Employee		

Requested by (Employee) Stephanie Bleau for Reg Buxton Date 07/22/2016
 Approved and Funds Certified (Department Director) _____ Date _____
 Pre-audited by Finance Dona Bayless Date 8.3.16
 City Manager Approval (required for Directors, out-of-state travel, or more than 10 days travel in fiscal year.) Frank Moss Date 8/1/16

Forward form to Finance for assignment of Travel ID number. Finance will return form to traveler.

POST TRAVEL CERTIFICATION After travel, complete "to be reimbursed" and "credit card or check" columns, attach original receipts, obtain appropriate signatures below, and forward to Finance Department. If reimbursement is required, attach payment authorization with explanation. City Travel is governed by **Chapter 2** of the City Code. Employee is to certify that all travel was in compliance with Chapter 2 of the City Code

Employee certification: _____ Date: 9/19/16
 Department final approval: Reg Buxton, Acting Date: 9/20/2016
 Audited by Finance: Dona Bayless Date: 9.20.16

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Handwritten notes in the lower left quadrant.

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