

Palomar Community College District  
San Marcos, CA 92069-1487  
Request for Travel Approval / Claim for Travel Expense

**FY 2021 - 2022**

Rate Change as of January 1, 2021

Applicant: \_\_\_\_\_ Ext: \_\_\_\_\_ Date: \_\_\_\_\_  
Dept: \_\_\_\_\_ Div: \_\_\_\_\_  
Meeting/Event: \_\_\_\_\_ City/State: \_\_\_\_\_  
Event Date From: \_\_\_\_\_ Departure Date: \_\_\_\_\_ Return Date: \_\_\_\_\_  
Event Date To: \_\_\_\_\_

Account	Fund	Org	Program	Class	Year	Proj/Grt	BusUnit	Fiscal Use
					2022			
					2022			
					2022			
6 digits	2 digits	6 digits	5 digits	2 digits	4 digits	7 digits	5 characters	

**REQUEST / APPROVAL FOR TRAVEL**

**CLAIM**

**Expenses Anticipated:**

**CalCard**

**Actual Expenses:**

**CalCard**

Mileage \_\_\_\_\_ X 0.560 \_\_\_\_\_

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(Prevailing IRS Standard Rate)

Commercial Transportation \_\_\_\_\_ Yes ☐

Commercial Transportation \_\_\_\_\_ Yes ☐

(Purchasing Requisition Required for PrePay-  
Send Req to Purchasing Dept)--Airfare costs  
cannot exceed state contracted rates

[Refer to contracted rates](#)  
[Official Contracted Air Fares](#)

Meals \_\_\_\_\_

Meals \_\_\_\_\_ Yes ☐

**\*\*\* Original Itemized Receipts are Required.**

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Lodging + Tax \_\_\_\_\_ Yes ☐

Lodging + Tax (\_\_\_\_ nights) \_\_\_\_\_ Yes ☐

**Attach Prepaid Lodging Request Form**

(Detailed hotel invoice Required)

Fiscal Use \_\_\_\_\_  
vendor # voucher #

Registration Fee \_\_\_\_\_ Yes ☐

Registration Fee \_\_\_\_\_ Yes ☐

**Attach Prepaid Registration Request Form**

(Receipts Required)

Fiscal Use \_\_\_\_\_  
vendor # voucher #

Public Transportation (estimate) \_\_\_\_\_ Yes ☐

Public Transportation (Receipts Required) \_\_\_\_\_ Yes ☐

Other Permissible Expenses inc. Parking (estimate) \_\_\_\_\_ Yes ☐

Other Permissible Expenses (Receipts Required) \_\_\_\_\_ Yes ☐

Total Estimated Expenses: \_\_\_\_\_ Yes ☐

**Travel Total Expense** \_\_\_\_\_  
**(\*Total must not exceed Total Funds Authorized)**

**Under Government Code Section 11139.8, The California Attorney -General has determined, as of this date, that the following states are subject to a travel ban: Alabama, Kansas, Kentucky, Mississippi, North Carolina, South Dakota, Tennessee and Texas. Palomar College Resolution #17-21535 support this. By signing below you are certifying that the travel requested will not take place in these states.**

Less direct Payments to Vendor(s) \_\_\_\_\_

Less charges paid with CalCard \_\_\_\_\_

Total Due Applicant \_\_\_\_\_

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_  
Total Funds Authorized (Completed by  
Senior/Executive Administrator OR Administrative Services Director)

Applicant Signature \_\_\_\_\_

Senior/Executive Administrator's Signature Or  
Administrative Services Director \_\_\_\_\_ Date \_\_\_\_\_

Senior/Executive Administrator's  
Signature OR Administrative Services Director \_\_\_\_\_

**Purpose of trip, remarks, details:**

**Cal Card Information:**

Cardholder Name: \_\_\_\_\_

Vendor #

Voucher #

Claim #

Audited by