

JRSO POST-TRIP WORKSHEET

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|--------------------------|--------------------------------|
| Name of Claimant: | |
| Business Dates: | Non-IODP Related Dates: |
| Trip To: | |

Purpose of Trip:

SUBMIT EXPENSES BELOW AND ATTACH DOCUMENTATION AS INDICATED

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| Individually purchased Airfare (Attach flight itinerary w/dates and times, class of service, and method of payment) | Lodging/Hotel: (original itemized receipt with zero balance) |
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Rental Car: (Paid itemized receipt required)

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|---|--|
| Personal Vehicle: Round Trip <input type="checkbox"/> One Way <input type="checkbox"/> | Address from: _____ Address To: _____ |
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| If Sailing: Date/Time Onboard | Date/Time Ashore |
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| <p style="text-align: center;">MISCELLANEOUS EXPENSES</p> Provide a receipt for any miscellaneous expense over \$75/incident (taxi, internet, parking, registration, gas for rental cars, currency exchange, foreign transaction fees). When payment is made using a foreign currency, the receipt must be converted to US Dollars. Documentation supporting the exchange rate used must be provided or Travel will use the conversion rate in Concur. Tips to hotel/airport staff are incidental expenses covered by Per Diem. | <p style="text-align: center;">PER DIEM</p> Were any meals provided? Enter all dates of travel and mark the meal provided with an X (no \$ amount) in the appropriate box. If traveler crossed International Date Line complete and attach Travel Time Calculator found at: https://www.timeanddate.com/time/travel.html If sailing, calculate date/time from home to time boarded ship or date/time disembarked ship to time arrived home. |
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| DATE | DESCRIPTION/BUSINESS PURPOSE | | | DATE | BREAKFAST | LUNCH | DINNER |
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PLEASE SIGN, DATE, AND AND ANY ADDITIONAL INFORMATION REGARDING TRAVEL

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| <p>FOR INTERNAL USE ONLY</p> FAMIS Account Number and class _____ Cost Ref _____ AMS REQ # _____ | <p>TOTAL EXPENSES \$ _____</p> Advance Received \$ _____ Amount Due IODP Advance Return \$ _____ Total Due Traveler \$ _____ |
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