



# REQUEST FOR REIMBURSEMENT OF TRAVELING EXPENSES

(Note the Travel Regulations on Reverse Side)



DARLENE GREEN  
Comptroller

DATE November 6, 2023

Req#3921

212 City Hall  
St. Louis, MO

Name Adam L. Layne Phone November 6, 2023 Dept. Fiscal Treasurer Office No. 343

Trip To: Atlanta, GA Method of Travel: Air

Purpose: Markets Group 10th Annual Southeast Institutional Forum Prior Approval By: Treasurer Adam L. Layne

	Time		Day/Date
Leave St. Louis	10:30	<input type="checkbox"/> AM <input type="checkbox"/> PM	Tuesday 11-14-23
Arrive	1:00	<input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Tuesday 11-14-23
Convention/Meeting Commencement	8:00	<input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	Wednesday 11-15-23
Convention/Meeting Adjournment	5:45	<input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Wednesday 11-15-23
Leave	9:25	<input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Thursday 11-16-23
Arrive St. Louis	10:10	<input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	Thursday 11-16-23

RECEIVED  
DEC 01 2023

Enter Expenses in Appropriate Date Column, Indicate "A" for Meals Served by Airline, "R" for Meals Provided by Registration

Date	Day/Date	Day/Date	Day/Date	Day/Date	Day/Date	Day/Date	Day/Date	Day/Date	TOTAL
	Tues-11-14	Wed-11-15	Thurs-11-16						
Fare	532.96								532.96
Registration	0								0
Limo - To Airport									0
Limo - From Airport									0
Breakfast		R							0
Lunch		R							0
Dinner		R							0
Hotel	139.295	139.295							278.59
Other: Uber fees	<del>78.39</del>	<del>66.45</del>	68.35						213.19
TOTAL	750.645	205.745	68.35	0	0	0	0	0	935.1024.74

REMARKS:

Less Uber fees

Less Advance

Less Registration

Less Prepaid Fare

Amount Due

Charge to Account No.

213.19

811.55

565400

I certify that the above is a true and accurate accounting of my expenses.

APPROVED:

jatkinson  
12/21/2023

(Signature)

(Date)

(Deputy Comptroller-Federal Grants)

(Date)

(Department Head)

(Date)

(Comptroller)

(Date)

**TRAVEL REQUEST (Review Travel Regulations)**

REV#70321

Date: \_\_\_\_\_

Name Adam L. Layne

Title Treasurer

Office Telephone: 314-366-3095

Dept./Section Parking

Dept. No. 343

Destination: City Atlanta

State GA

Purpose: Markets Group 10th Annual Southeast Institutional Forum

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Convention/Meeting: Commencement Time 8:00am  AM  PM Day/Date Wednesday 11-15-23 Adjournment Time 5:45pm  AM  PM Day/Date Wednesday 11-15-23  
(Enclose a copy of Convention/Seminar/Meeting announcement with request).

**PROPOSED ITINERARY**

Departure Time: 10:30  AM  PM Day/Date Tuesday 11-14-23

Arrival Time: 1:00  AM  PM Day/Date Tuesday 11-14-23

Departure Time: 9:25  AM  PM Day/Date Thursday 11-16-23

Arrival Time: 10:10am  AM  PM Day/Date Thursday 11-16-23

Method of Travel:  Air  Rail  Bus  Private Auto  City Car  
Indicate One-Way/Mileage If Traveling By Auto \_\_\_\_\_

**ESTIMATE OF TRIP EXPENSES**

Air Coach Fare \$ 532.96 Limousine \$ 0.00  
Hotel @ 2 /Night \$ 278.59 Uber fees 213.19  
Registration \$ 0.00 Others \$ \_\_\_\_\_  
Total \$ 1,024.74

**TRIP EXPENSES TO BE PAID BY:**

a) City Funds \_\_\_\_\_ b) Special Funds X \_\_\_\_\_

Account No. 565400 Account Title Travel

\*Indicate below meals covered by Registration Fees:

1 Breakfasts 1 Lunches 1 Dinners  
Airline Tickets Required (Prepaid Fare) Yes \_\_\_\_\_ No N/A

Advance payment approved: \$ \_\_\_\_\_

APPROVED: Adam L. Layne (Division Head) 11-6-23 (Date)

APPROVED: \_\_\_\_\_ (Federal Grants) \_\_\_\_\_ (Date)

APPROVED: \_\_\_\_\_ (Department Director) \_\_\_\_\_ (Date)

APPROVED: \_\_\_\_\_ (Comptroller) \_\_\_\_\_ (Date)