

REQUEST FOR REIMBURSEMENT OF TRAVELING EXPENSES (Note the Travel Regulations on Reverse Side)

TANK COMPANY	
SOLIFAS COM	

DARLENE GI Comptroli		ATE						212 City H St. Louis,				
Name Adam Layne			Phone 314	Dept.	Fiscal Trea		No343					
Trip To: Washington DC				Meth					140.			
Purpose: National League	of Cities (Conference-	NLC	Prior		By: Treassu	ırer Adam I	L. Layne				
					7 Tim			Day/	Date			
Leave St. Louis Sunday I	June 25, 20	23	RECEN	620 AM Sunday June 25, 2023								
Arrive Sunday June 25, 20	23		JUL 21	7:55								
Convention/Meeting Con		ent CON	MPTROLLE	R'S OFFIC	E2:80							
Convention/Meeting Adjo	ournment				2:00	□ AM ■ PM	Wednesday June 28, 2023					
Leave Washington DC - 7	Thursday Ju	ne 29, 2023		-	7:45	■ AM						
Arrive St. Louis Thursday	June 29, 20	023	*************									
Enter Expenses in Appl	ropriate Dat	te Column,	Indicate "A	" for Meals			' for Meals	Provided b	v Registration			
	Day/Date	Day/Date	Day/Date	Day/Date	Day/Date	Day/Date	Day/Date	Day/Date				
Date 🖾	Sun-6/25	Mon- 6/26	Tues- 6/27	Wed- 6/28	Thurs- 6/29							
Fare	707.96								707.96			
Registration	0								0			
Limo - To Airport									0			
Limo - From Airport									0			
Breakfast		R	R	R					0			
Lunch		R	R	R					0			
Dinner	25	R	R	R					25 🗸			
Hotel	241.15	24].15	241.15	241.16					964.61			
Other: Uber fees	/60	√ 36.92	15.95	210	90.27				203/14 57.9			
									0			
CONTRACTOR DE LA CONTRA									0			
AND THE PROPERTY OF THE PROPER				266/6					0			
TOTAL	1034.11	278.07	257.1	241.16		0	0	0	1900.71 7755			
REMARKS:							Less	Advance	California (Section of Section of			
Chamber County of the County o				Hotel &	Trans. fees	jictration-	1.167.75					
ATTENDED TO THE PROPERTY OF TH				Less Prepaid Fare 207-96								
				Amount Due 1755 125.00								
416 41 4 41				Charge to Account No. 565400								
I certify that the above accounting of my expe	is a true a nses.	nd accura	ite			A	PPROVE	D:	NAME OF THE OWNER OWNER OF THE OWNER OWNE			
(Signature)	0 0		(Da	(De	put Comptro	oller-Federal	Grants)	71	(Date)			
(Department Head)	· Any	me	7-13 (Da	1-23 (Co	emptroller)	MI		3/	24/23 (Date)			
COMP-34 (Rev. 10/15 ML)			1	Req#3719)				\(\infty\)			

APPROVED: Comment Director) BD-100 (Rev.10/15ML)	APPROVED: (Division Head)	アアフトリフ	P 22 20	Account No. Account Title Travel	a) City Funds b) Special Funds $\overset{X}{=}$	TRIP EXPENSES TO BE PAID BY:	Arrival Time: 9:35 ■ AM Day/Date Thursday J	Departure Time: 7:45 ■ AM Day/Date Thursday J	Arrival Time: 7:55 AM Day/Date Sunday June 25, 2023	Departure Time: 6:20	PROPOSED ITINERARY	Convention/Meeting: Commencement Time 2:30 AM Day/Date M. (Enclose a copy of Convention/Seminar/Meeting announcement with request).		National League of Cities -NLC	Destination: City Washington DC	Dept./ Section Parking	NameAdam Layne	TRAVEL REQUEST (Review Travel Regulations)
(Date)	(Date)	Airline Tic	3	*Indicate	*Food	*Reg	Thursday June 29, 2023 Hotel	Thursday June 29, 2023 Air C	te 25, 2023		Meth	Monday June 26, 2023 M Day/Date Monday June 26, 2023 ent with request).	COMPTROLLER'S OFFICE	JUL 2 1 2023	Z m		Title Treasurer	Req# 3/19
(Comptroller)	(Federal Grants)	Airline Tickets Required (Prepaid Fare) Yes	Breakfasts 3 Lunches	ate below meals covered by Registration Fees:	d \$25.00	*Registration \$0.00 Total	Hotel @\$241.15 x4/Night \$ 964.61 V Others	Air Coach Fare \$Limousine	ESTIMATE OF TRIP EXPENSES	Indicate One-Way/Mileage If Traveling By Auto	Method of Travel: ■ Air □ Rail □ Bus □ Priv	23 Adjournment Time 2:00 🗀 AM Day/Date			State	Dept. No. 343	314 Office Telephone:	Date:
(Date)	(Date)	No _	3 Dinners			\$1,900.71	\$ 203.14	\$ 0.00			□ Private Auto □ City Car	Wed June 28,2023					314-622-3434	