City of Hamilton
Travel Authorization Form

Form Type	Travel Request Form

Traveling From: 12/6/2016	through	12/9/2016	Please note, these are the dates that you will be leaving and returning from the trip. These should include the travel days in addition to the class/conference/meeting dates.
Date of Departure		Date of Return	

Authorization is requested by: Jim Williams | Electric

Employee Name | Department

To attend (Course/Conference/Sponsor): Greenup FERC Meeting and CapX Review

Located at (City and State): Chicago, Illinois

Registration Fee (Cost of Course/Conference/Meeting) | Basic Fee: $ | Other/Additional Fee: $

Business Justification for Travel

Transportation Expenses
Check the appropriate boxes and record the estimated miles or cost for each mode of transportation to be used. For personal car, only estimated miles are necessary

	Miles	Estimated Cost
☒ City Vehicle		
☐ Personal Car		$
☐ Airplane	N/A	$
☐ Rental Car	N/A	$

Meal/Food Expenses
Check the appropriate box; enter the number of days and the daily per diem amount. Per Diem rate table: M&IE Per Diem Rates

	Cost Per Day	# of Days	Estimated Cost
☐ In-town/Local			$
☒ Overnight	$ $ 74.00	4	$ $ 296.00

Lodging Expenses

Hotel/Motel Name	Cost Per Night	# of Nights	Estimated Cost
SpringHill Suites Chicago Downtown	$ $ 137.00	3	$ $ 411.00

Miscellaneous Expenses
Check the appropriate boxes and record the estimated cost for all applicable miscellaneous expenses.

	Amount		Amount
☒ Parking Costs	$	☐ Tolls	$
☐ Taxi Expenses	$	☐ Other	$

Account Number:	502	930	640	550	Total Estimated Cost: $	$ 707.00

Submit for Authorization

Send Via Email

For Department Head Use Only

Kevin M. Maynard 12-2-16

Approved by

☐ Approved

Send Approval

Form Type | Travel Request Form

City of Hamilton
Travel Authorization Form

| Traveling From: 12/6/2016 | through | 12/9/2016 | Please note, these are the dates that you will be leaving and returning from the trip. These should include the travel days in addition to the class/ conference/meeting dates. |
| Date of Departure | | Date of Return | |

Authorization is requested by: | Kenny Hilger | Electric
Employee Name | Department

To attend (Course/Conference/Sponsor): Greenup FERC Meeting and CapX Review

Located at (City and State): Chicago, Illinois

Registration Fee (Cost of Course/ Conference/Meeting) | Basic Fee: $ [ ] | Other/Additional Fee: $ [ ]

Business Justification for Travel

Transportation Expenses
Check the appropriate boxes and record the estimated miles or cost for each mode of transportation to be used. For personal car, only estimated miles are necessary

	Miles	Estimated Cost
☒ City Vehicle		
☐ Personal Car	[ ]	$ [ ]
☐ Airplane	N/A	$ [ ]
☐ Rental Car	N/A	$ [ ]

Meal/Food Expenses
Check the appropriate box; enter the number of days and the daily per diem amount. Per Diem rate table: M&IE Per Diem Rates

	Cost Per Day	# of Days	Estimated Cost
☐ In-town/Local	[ ]	[ ]	$ [ ]
☒ Overnight	$ $ 74.00	4	$ $ 296.00

Lodging Expenses | Hotel/Motel Name | Cost Per Night | # of Nights | Estimated Cost
| | SpringHill Suites Chicago Downtown | $ $ 137.00 | 3 | $ $ 411.00 |

Miscellaneous Expenses
Check the appropriate boxes and record the estimated cost for all applicable miscellaneous expenses.

	Amount		Amount
☒ Parking Costs	$ [ ]	☐ Tolls	$ [ ]
☐ Taxi Expenses	$ [ ]	☐ Other	$ [ ]

Account Number: 502 | 930 | 640 | 550 | **Total Estimated Cost: $** $ 707.00

Submit for Authorization
[Send Via Email]

For Department Head Use Only
Terri M. Mayard 12-2-16
Approved by

☐ Approved
[Send Approval]

Form Type	Travel Request Form

City of Hamilton
Travel Authorization Form

Traveling From: 12/6/2016	through	12/9/2016	Please note, these are the dates that you will be leaving and returning from the trip. These should include the travel days in addition to the class/conference/meeting dates.
Date of Departure		Date of Return	

Authorization is requested by: Rick Hawkins | Electric

Employee Name	Department

To attend (Course/Conference/Sponsor): Greenup FERC Meeting and CapX Review

Located at (City and State): Chicago, Illinois

Registration Fee
(Cost of Course/Conference/Meeting)   **Basic Fee:** $ [ ]   **Other/Additional Fee:** $ [ ]

Business Justification for Travel

Transportation Expenses
Check the appropriate boxes and record the estimated miles or cost for each mode of transportation to be used. For personal car, only estimated miles are necessary

		Miles	Estimated Cost
☒ City Vehicle			
☐ Personal Car		[ ]	$ [ ]
☐ Airplane		N/A	$ [ ]
☐ Rental Car		N/A	$ [ ]

Meal/Food Expenses
Check the appropriate box; enter the number of days and the daily per diem amount. Per Diem rate table: M&IE Per Diem Rates

	Cost Per Day	# of Days	Estimated Cost
☐ In-town/Local			$
☒ Overnight	$ 74.00	4	$ 296.00

Lodging Expenses

Hotel/Motel Name	Cost Per Night	# of Nights	Estimated Cost
SpringHill Suites Chicago Downtown	$ 137.00	3	$ 411.00

Miscellaneous Expenses
Check the appropriate boxes and record the estimated cost for all applicable miscellaneous expenses.

	Amount		Amount
☒ Parking Costs	$ [ ]	☐ Tolls	$ [ ]
☐ Taxi Expenses	$ [ ]	☐ Other	$ [ ]

Account Number: 502 | 930 | 640 | 550   **Total Estimated Cost:** $ 707.00

Submit for Authorization

[Send Via Email]

For Department Head Use Only

Kevin M. Maxwell 12-2-16
Approved by

☐ Approved

[Send Approval]

Form Type [Travel Request Form]

City of Hamilton
Travel Authorization Form

Traveling From: 12/6/2016 through 12/9/2016	Please note, these are the dates that you will be leaving and returning from the trip. These should include the travel days in addition to the class/conference/meeting dates.
Date of Departure **Date of Return**	

Authorization is requested by: [Dan Moats] [Electric]

Employee Name　　　　　　　　Department

To attend (Course/Conference/Sponsor): [Greenup FERC Meeting and CapX Review]

Located at (City and State): [Chicago, Illinois]

Registration Fee
(Cost of Course/Conference/Meeting)　　**Basic Fee:** $ [　　　]　　Other/Additional Fee: $ [　　　]

Business Justification for Travel

[ ]

Transportation Expenses
Check the appropriate boxes and record the estimated miles or cost for each mode of transportation to be used. For personal car, only estimated miles are necessary

		Miles	Estimated Cost
☒	City Vehicle		
☐	Personal Car	[　]	$ [　]
☐	Airplane	N/A	$ [　]
☐	Rental Car	N/A	$ [　]

Meal/Food Expenses
Check the appropriate box; enter the number of days and the daily per diem amount. Per Diem rate table: M&IE Per Diem Rates

		Cost Per Day	# of Days	Estimated Cost
☐	In-town/Local	[　]	[　]	$ [　]
☒	Overnight	$ [$ 74.00]	[4]	$ [$ 296.00]

Lodging Expenses

Hotel/Motel Name	Cost Per Night	# of Nights	Estimated Cost
[SpringHill Suites Chicago Downtown]	$ [$ 137.00]	[3]	$ [$ 411.00]

Miscellaneous Expenses
Check the appropriate boxes and record the estimated cost for all applicable miscellaneous expenses.

		Amount			Amount
☒	Parking Costs	$ [　]	☐	Tolls	$ [　]
☐	Taxi Expenses	$ [　]	☐	Other	$ [　]

Account Number: [502] [930] [640] [550]　　　　**Total Estimated Cost:** $ [$ 707.00]

Submit for Authorization

[Send Via Email]

For Department Head Use Only

Pam M. Mayor 12-2-16

Approved by

☐ Approved

[Send Approval]