Enter ID | Get Data | Save Data | Clear Form

VALENCIA COMMUNITY COLLEGE

IN-DISTRICT TRAVEL REPORT VOUCHER

DFA-1
Rev. 07-07

NAME (print or type) . **Mail Code** _

HOME ADDRESS _____ _____
(If applicable) Street City, State Zip code

DATE	FROM LOCATION	TO LOCATION	REASON FOR TRAVEL	MILEAGE	TOLLS/ PARKING

TOTALS 0.00 $0.00

MILEAGE X RATE = $ -$0.00

TOTAL AMOUNT DUE $ -$0.00

_____ _____ _____
SIGNATURE OF TRAVELER VID # DATE

APPROVED BY: _____ _____
SIGNATURE DATE

Charge to:

INDEX_____ **/ACCT**_____ **(or) FUND**_____ **ORG**_____ **ACCT**_____ **PROG**_____

- ☐ **Please attach a printout from Yahoo, Mapquest, Google, etc. for travel to/from non-campus locations**
- ☐ **Please include home address on the form, if traveling from or to home and claiming excess miles**
- ☐ **Submit to: Accounts Payable DTC-3**