

Employee

Non-Employee

Employee PSU ID

Traveler's Name

Email Address

Street Address,
City, State Zip

Daytime Phone #

PSU Employment Status

Exempt

Non-Exempt

Wage

NA

Business Purpose: Participate in Extension Meetings & Demonstrations Harrisburg, PA

Committee Served on

Departure			Arrival		
Location	Date (mm/dd/yyyy)	Time	Location	Date (mm/dd/yyyy)	Time

Receipts Required?	*Mileage rate as of 1/1/2020.	
No	Mileage (if personal vehicle)	miles @ .575 cents/mile*
No	Fleet Vehicle Used (check if yes)	-----
Yes	Other Long Distance Transportation: Bus/Trains	
No	Local Metro/Subway/City Bus/Tolls	
Yes	Taxi/Shuttle/Limo	
Yes	Parking	
No	Lodging -- record number of nights at Sheraton Direct Billed -- Paid on Purchase Order Through PSU	-----
No	Meal Per Diem (total from page 2)	
Yes	Other (Please List)	
		Total
	Travel Expenses Not Reimbursed by PSU	
	Amount Due to Traveler	

Meal per Diem Expense: Please claim only what you spend.

The Daily Meal Per Diem for Farm Show 2020 is Meals \$56/ Incidentals \$5

Total of \$61/Day is the Maximum Allotment

Please mark appropriate code in column next to meal amount --"C" if paid by cash; "P" if paid by purchasing card(employees only)

Date (mm/dd/yyyy)	Location	C or P	Breakfast Amount	C or P	Lunch Amount	C or P	Dinner Amount	Total Per Diem

Total Meal Per Diem (carry amount forward to Per Diem line on Page 1)

All committees with fund 83UR as representing the Farm Show Grant, must provide all Meal Receipts to the Farm Show Office for their auditors. Prepare a second copy of your worksheet with meal receipts attached to your Chairperson for signature and forwarding to Farm Show Office. Please don't send receipts to Penn State Offices.

Comments:

Departmental Accountant/ERS Delegate: Name: _____ Access ID: _____
(required for employees only)
Address: _____

Required Traveler's Signature: _____ Date: _____

Send to Committee Chair for completion and approval signature

This section to be completed by Committee Chairs:

Please refer to Farm Show Database ("List Members by Name") For Fund Number (83UR-PDA or 1212/10010-PSU) and Committee Abbrev/Sub-Object information and record in the appropriate spaces below.

Chair's please record in the database your approval of each member's form so they receive an email update on status.

Abbrev.Committee/Sub-object	Committee Name	Budget #	*Fund #	Object Code	Cost Center	TOTAL Amount
		504-04		336	4275	
		504-04		336	4275	

Required Committee Chairperson's Signature: _____ Date: _____

Committee Chair forward Non-Employee forms to Farm Show 2020, 318C Tyson Bldg, University Park, PA 16802. All PSU Employees to their ERS Delegates for processing as indicated by traveler.

This section to be completed by Departmental Accountant/Delegate:

ERS Report Name: _____
FS19-Name-Dates (i.e. FS20-Story-1/7-11/20)