Farm Show 2022 **2022 Farm Show**

ERS Travel Worksheet - Process by March 9, 2022

☐ Employee ☐ Non-Employee Employee PSU ID

Traveler's Name

Email Address Daytime Phone #

PSU Employment Status

Street Address, City, State Zip

☐ 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 to be updated 1/1/2022.	
No	Mileage (if personal vehicle) ____ miles @ .tbd cents/mile*	$ 0.00
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)	$ 0.00
Yes	Other (Please List)	
	Total	$ 0.00
	Travel Expenses Not Reimbursed by PSU	
	Amount Due to Traveler	$ 0.00

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

The Daily Meal Per Diem for Farm Show 2022 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
								$ 0.00
								$ 0.00
								$ 0.00
								$ 0.00
								$ 0.00
								$ 0.00
								$ 0.00
								$ 0.00
								$ 0.00
								$ 0.00
								$ 0.00
								$ 0.00
								$ 0.00
								$ 0.00
								$ 0.00
	Total Meal Per Diem (carry amount forward to Per Diem line on Page 1)							$ 0.00

All committees 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 their forwarding to Farm Show Office. Please don't send receipts to Penn State Offices.*

Comments:

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

Address: _____

Required Traveler's Signature: _____ Date: _____

Send to Committee Chair for completion and approval signature

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This section to be completed by Committee Chairs:

Please refer to Farm Show Database ("List Members by Name") For Fund Allocation (PDA Grant or PSU Extension) and Committee Name or Abbrev. information and record in the appropriate spaces below.

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

Committee Name	or Abbrev.	Budget Area	GL 52780100 Travel	Internal Order	Fund	TOTAL Amount
		PDA FARM SHOW		500000017924	21215 02000	
		PSU EXTENSION		550000002747	21215 4275	

Required Committee Chairperson's Signature: _____ Date: _____

Committee Chair forward Non-Employee forms to Farm Show 2022, PSU Extension, 323 Ag Admin. Blg. University Park, PA 16802; and 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. FS22-Story-1/7-11/22)