Farm Show 2023

1/10/2023

ERS Travel Worksheet - Process by March 7, 2023

☐ Employee ☐ Non-Employee Employee PSU ID

Traveler's Name

Email Address Daytime Phone #

PSU Employment Status
☐ Exempt
☐ Non-Exempt
☐ Wage
☐ NA

Mailing Address

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

Notes: Committee Served on

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

Receipts Required?	*Mileage rate as of 1/10/2023	
No	Mileage (if personal vehicle) ____ miles @ .655 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 2023 is Meals $59/ Incidentals $5 ***Total of $64/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/yyy)	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*** *and submit it to your Chairperson for signature and their forwarding to the 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 Financial Allocation (PDA Grant or Penn State Extension) and Committee Name or Abbrev. 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.

Committee Name	Budget Area	Internal Order	GL Account	Total Amount
	PDA Grant	500000022613	52780100	
	Penn State Extension	550000002747	52780100	

Required Committee Chairperson's Signature: _____ Date: _____

Committee Chair forward Non-Employee forms to Farm Show 2023, Penn State Extension, 323 Ag Admin Bldg, University Park, PA 16802. All PSU employees to their ERS Delegates for processing as indicated by traveler

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This section to be completed by Departmental Accountant/Delegate:

ERS Report Name: _____

FS23-Name-Dates (i.e. FS23-Story-1/7-11/23)