Farm Show 2024

11/6/2023

Travel Worksheet - Process by March 4, 2024

☐ 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/yyyy)	Time	Location	Date (mm/dd/yyyy)	Time

Receipts Required?	*Mileage rate to be updated for 2024	
No	Mileage (if personal vehicle) ____ miles @ .xxxx 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 2024 is Meals $59/ Incidentals $5,***Total of $64/Day is the Maximum Allotment****-see Instructions sheet for breakdown and first/last day rate.*
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 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/Travel Delegate: (required for employees only) Name: _____ Access ID: _____

Address: _____

Required Traveler's Signature: _____ Date: _____

Send to Committee Chair for completion and approval signature

This section to be completed by Committee Chairs:

Refer to Farm Show Database ("List Members by Name"). Identify the financial allocation (PDA Grant or Penn State Extension) and record Committee Name/Abbreviation information in the appropriate spaces below.

Chairperson'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 Farm Show	500000026622	52780100	
	Penn State Extension/Ag Exhibit	800000031820	52780100	

Required Committee Chairperson's Signature: _____ Date: _____

Committee Chair forward Non-Employee forms to Farm Show 2024, Penn State Extension, 323 Ag Admin Bldg, University Park, PA 16802 OR Email Scanned documents directly to lph5334@psu.edu, committee as subject.PSU employees to their travel Delegates for processing.

This section to be completed by Departmental Accountant/Delegate:

Farm Show Report Name: _____

FS24-Name-Dates (i.e. FS24-Story-1/7-11/24)