			ounty Trave					Ven#	
	for Event	Specific In	-Service St	taff Develop	oment			Inv#	
With Formulas								Data/T	ime of
Employee:								Date/T Required I	
Address:							_		
Title of Event:									
Location of Event:							_		
							_	Date/	
Location of Lodging:							_	Feasible t	lo Return
				1		1	_	 ¬	
Mark with "X"	Sun	Mon	Tues	Weds	Thur	Fri	Sat	_	
if it's a Travel Day						x			
The Franklin County Travel Po claimants leave early/late when	n not necessary	•				-		1	
Meal Expenses:	COSt Cla		als Not Provided is by (Circle One): Per			Per D	Diem Rate Receipts (Attac		Attached)
M1		l fan de af der		de deber de el Er					
Mari	with "P" if Mea								- (
Des al fa at	Sun	Mon	Tues	Weds	Thurs	Fri	Sat	Total Co	
Breakfast									0.00
Lunch									0.00
Supper									0.00
Incidentals									0.00
Г									
Other Expenses:				Т	T			1	
	Sun	Mon	Tues	Weds	Thurs	Fri	Sat	Total Co	st Other
Lodging (without TN Sales Tax)									0.00
Parking (without Receipt \$8)									0.00
Misc Items (Receipts Attached)									0.00
Total Miles Round Trip:	0	х Сш	x Current Mileage Rate 0.67		0.67	Total Cost Mileage			0.00
					0.01	1010100	or initiago		0.00
						Total	Claim:		0.00
Employee Signature:		Date				Expense L	ine]
				Fund	Dept	Obj	СС	Sub Obj]
Supervisor Signature:		Date							

Claimants are also required to submit a certificate of attendance (Name Tag will Suffice), agenda & hotel receipts before claims can be paid. By signing this claim employees & supervisors certify this document is true & correct.

Claimants Travel Rate						
Per Diem	Per Meal	75%				
Full Day	\$59.00	\$44.25				
Breakfast	\$13.00	\$9.75				
Lunch	\$15.00	\$11.25				
Dinner	\$26.00	\$19.50				
Incidentals	\$5.00	\$3.75				

Rate	County/City					
\$59	Sevier & Blount (Gatlinburg/Townsend)					
\$64	Knox Co (Knoxville) Hamilton Co (Chattanooga)					
\$69	Shelby (Memphis) Williamson Co (Brentwood/Franklin)					
\$79	Davidson County (Nashville)					

Franklin County follows State of Tennessee Travel Rates All Counties Not Listed the Rate is \$59.00 M, M & I

Out-of-State M M & I - Reimbursement Rate as per CONUS

https://www.gsa.gov/travel/plan-book/per-diem-rates

Meal & Incidental Rates								
Per Diem	Reg M & I	75%						
Full Day	\$64	\$48.00	\$69	\$51.75	\$74	\$55.50	\$79	\$59.25
Breakfast	\$14	\$10.50	\$16	\$12.00	\$17	\$12.75	\$18	\$13.50
Lunch	\$16	\$12.00	\$17	\$12.75	\$18	\$13.50	\$30	\$22.50
Dinner	\$29	\$21.75	\$31	\$23.25	\$34	\$25.50	\$36	\$27.00
Incidentals	\$5	\$3.75	\$5	\$3.75	\$5	\$3.75	\$5	\$3.7

If there are special county related circumstances concerning your trip please note below:	