

North Pacific Fishery Management Council

Dan Hull, Chairman
Chris Oliver, Executive Director



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Visit our website: <http://www.npfmc.org/>

TRAVEL EXPENSE CLAIM

Claimant:							
Mailing Address:							
Purpose of Travel:							
GSA MIE Seattle, WA	Daily MIE \$74	Travel Day \$56	Breakfast \$17	Lunch \$18	Dinner \$34	Incidentals \$5	

Dates	Location	Meals and Incidental Expense <i>(if meal provided please note with a "P")</i>					Hotel <i>(receipt required)</i>
		Travel Day	Breakfast	Lunch	Dinner	Incidentals <i>(with overnight stay)</i>	

ITEMIZE OTHER EXPENSES such as Airfare, Taxi, Parking and Private Car @ \$.535 per mile (show miles).
Receipts are required for items \$75 or greater.

Total Travel Expenses	\$
Less Travel Advance	-\$
Total Requested Claim	\$

Claims must be filed within 30 days after travel is complete. Late claims may not be honored.

The above expenses were incurred by me while conducting official business for the North Pacific Fishery Management Council. No other claim will be filed for travel.

Signature of Claimant: _____ Date: _____

Claim Approved by: _____ Title: _____ Date: _____