



CITY OF PALM BAY, FLORIDA

Travel Request/Advance Request

Contact/Ext

Control #

Request Date:

Name:	Christina Born	Destination:	3CMA Conference, Arlington, TX			
Department/Division:	City Manager's Office	Date of:	Departure 9/3/2024	Return 9/7/2024		
Account To Be Charged:	001-1210-512-4001 & 5501	Time of:	8:00am	2:00pm		
Account To Be Charged:		Estimated Cost:	before mileage reimbursement			\$2,222.56
Purpose of Travel (Specify Conference, School or Other Reason) - ATTACH ITINERARY						
Attend the 2024 3CMA Annual Conference.						
Date Approved By Council: _____						
Transportation: boldface or circle choice(s) POV - Estimated Mileage City Vehicle						
Common Carrier (complete below)						
PREPAID EXPENSES		VENDOR/ADDRESS		EXPLANATION	AMOUNT	FINANCE USE ONLY
Registration		3CMA Annual Conf 2024		Registration \$650		Vendor # Check #
Due Date						Date
Hand Carry Y N					\$650.00	
Lodging		Loews Arlington Hotel		Rate	\$195.00	Vendor # Check #
Due Date		888 Nolan Ryan Expressway				Date
		Arlington, TX 76011		# Nights	4	
Hand Carry Y N					\$780.00	
Common Carrier (if applicable)		Airfare- roundtrip				Vendor # Check #
Due Date						Date
Hand Carry Y N					\$400.00	
Other Expenses		Hotel tax				Vendor # Check #
Due Date						Date
Hand Carry Y N					\$142.56	
Other Expenses		Ride share to/from airport				Vendor # Check #
Due Date						Date
Hand Carry Y N					\$100.00	
PER DIEM ADVANCE: Advanced or Upon Return (circle one)						Vendor # Check #
Refer to www.gsa.gov for rates - <u>attach proof of rate</u>						
(Lodging prepaid - receipt required)						
Breakfast	0	@	\$14.00	=	\$0.00	Date
Lunch	3	@	\$16.00	=	\$48.00	
Dinner	3	@	\$29.00	=	\$87.00	
Incidentals	3	@	\$5.00	=	\$15.00	
					\$150.00	

TRAVEL APPROVALS

Department Head

Date

Finance

Date

(if applicable)

City Manager

Date