



**AGREEMENT DESCRIPTION:** \_\_\_\_\_

**AGREEMENT ID:** \_\_\_\_\_

**REPORTING PERIOD: From** \_\_\_\_\_ **To** \_\_\_\_\_

TRAVEL							
Doc Id #	Attendee Name/Job Title	Fare Cost	Lodging Cost	Meals Cost	Total Cost	Federal Share	Match Share
<b>Total Cost</b>							

*“By submitting this reimbursement request, our agency is attesting that all project expenditures listed in this reimbursement request have been reviewed and confirmed. This attestation confirms our compliance and adherence with the Federal Uniform Guidance 2 CFR 200, North Carolina General Statutes 143C-6-23 and 09 NCAC 03M, and the special conditions outlined in our agency’s executed grant award with the Governor’s Crime Commission.”*

*“By submitting this reimbursement request, our agency is attesting that (1) the Vendors/ Contractors have been selected using Grantee’s procurement policy, as required by the original agreement, (2) according to the requirements of 2 CFR 200.214 Suspension and debarment, and that verification has been completed and documented.”*

See instructions on NEXT PAGE



Instructions:

1. **Document number:** Assign an identification number or letter to each document related to the cost reimbursement requested e.g., hotel bill, credit card statement, bank statement, issued or cleared check showing proof of payment, etc. and associated with the travel expense.
2. **Attendee name/job title:** Enter employee attending conference, training, or other travel.
3. **Fare cost:** Enter airfare, train, mileage transportation cost per each employee (state per diem rate for in-state travel, federal per diem rate for out-of-state travel)
4. **Lodging costs:** Enter overnight accommodations, hotel costs per each employee (state per diem rate for in-state travel, federal per diem rate for out-of-state travel)
5. **Meals cost:** Enter subsistence costs per each employee (state per diem rate for in-state travel, federal per diem rate for out-of-state travel)
6. **Total cost:** Enter total costs per each employee, includes lodging, airfare, mileage, subsistence costs per each employee (state per diem rate for in-state travel, federal per diem rate for out-of-state travel)
7. **Federal share:** Enter amount of to be paid by the grant.
8. **Match share:** Enter amount of to be paid by the grantee agency (if applicable)

For this request to be approved, back up documentation must be included with this coversheet: Mileage/travel log for each employee, dates of travel, destination, and mileage. All reimbursement requests for travel, lodging and subsistence must be listed on a form that is signed by both the employee and supervisor. Lodging, luggage, and transportation receipts must be included as supporting documentation. Failure to comply with these instructions may result in the delayed or denial of this request. For Per Diem costs visit [www.osbm.nc.gov](http://www.osbm.nc.gov) or [www.gsa.gov](http://www.gsa.gov)