PDQ Travel Expense Voucher National Cancer Institute PDQ® Editorial Board Meetings

Name:			Meeting Start Date:		
Check Payable To:			Meeting End Date:		
Address you want your New Address? Y N PDQ Editorial Board:					
Purpose of Expense: To be completed by JBS personnel			Meals & Lodging Expenses		Amount
			52-02 Lodging (room and tax only) Traveler: Attach hotel receipt if applicable; this section to be completed by JBS personnel		\$
Job Code: 00917.001.002.001			52-03 M & IE To be completed by JBS personnel		\$
For JBS accounting internal use only			52-06 For Accounting Us	e Only	\$
				TOTAL	\$
52-04 Ground Transpor	tation: Shuttles, Taxis	 s, Ра	rking, Public Transportation	n, etc.	
Date(s) of Travel	City of Departure		Round Trip Mileage		
				\$	
				\$	
				\$	
			TOTAL \$		
51-00 Local Travel: Mile					
Date(s) of Travel	City of Departure	Ro	und Trip Mileage	Cost (\$0	0.655/mile)
				\$	
				\$	
<u> </u>			TOTA		
Less prepaid by JBS:		(to	be completed by JBS personnel)		
TOTAL REQUESTED:		(to	be completed by JBS personnel)		
Traveler's Signature:			Date:		
Please include ALL ne	ecessary receipts (n:	arkir	ng, taxi, bus, or shuttle re	ceints over	r \$75.00

Please include ALL necessary receipts (parking, taxi, bus, or shuttle receipts over \$75.00 and hotel bill where applicable) so we may process your reimbursement form quickly. JBS mails expense checks within 21 days of receiving complete and accurate vouchers that have required receipts and original signatures.

INSTRUCTIONS CONTINUE ON NEXT PAGE

Submit this completed form by email to: NCITravel@jbsinternational.com or via mail or fax.

Mail: JBS International, Inc.

Attn.: Accounting

11200 Rockville Pike, Suite 320 North Bethesda, Maryland 20852

Fax: 301-589-2594

Attn.: Accounting

Honoraria: Honoraria checks in the amount of \$200 are processed separately from the travel reimbursements. If you previously submitted your completed and signed honorarium voucher form, no additional action is required. If JBS does not have your completed honorarium voucher form on file, you may be contacted for additional information.

GUIDELINES FOR COMPLETING EXPENSE VOUCHER

Travelers: Complete this form except where indicated.

Attach receipts for parking, taxi, bus, or shuttle greater than \$75.00 and hotel bill where applicable. Complete and sign one expense voucher per trip.

Purpose of Expense: JBS will complete this section. The JBS job code has been provided.

Meals & Lodging Expenses: For lodging, attach hotel receipt, if applicable. JBS will complete this section. Total M & IE will be calculated at a flat three-fourths of the applicable per diem rate for the first and last day of travel, and a full rate for travel days in between. The per diem rate is based on the city and/or county in which you are lodging. If there is no applicable rate, the standard CONUS rate of \$96 will be used for lodging and \$59 will be used for M&IE. Per diem rates are located on the GSA website: https://www.gsa.gov/travel/plan-book/per-diem-rates.

Ground Transportation: Indicate cabs/taxis, shuttles, parking, and public transportation to and from airports, train stations, site visits, meeting, training, or conference sites.

Local Travel: Indicate personal car mileage calculated at 0.655 cents per mile, tolls, cabs/taxis, shuttles, parking, and public transportation within 100 miles and 12 hours of home or office to and from the meeting, training, and conference sites.

By signing this form, I certify that the reimbursement requested is valid and accurate for the corresponding Board Meeting.

Revised: 3/2023