STATE OF IOWA - NON-EMPLOYEE TRAVEL LOG

(Attach supporting documentation to the back of this form)

Doc	umer	nt Nu	mber							Vendor Line										
Name	and Hor	me Addr	ress		Official Domicile						Normal Job Duties				rpose of Travel					
Dozon	no \//or	40.0			122 South Ford Street						├			Staff Development						
Rozan	ne Ward	Jei		An	Anamosa Iowa 52205									Required by Federal Government						
											Training Conference/Seminar			State Iowa Council for Early Access						
					TOWE			STATE VEHICLE			Content	MEALS	illiai		LOD	LODGING				
YEAR	TIN	ΛE		TRAV	TRAVEL			-	SONAL									AND OTHER EXPENSES		
11.18.22	LEFT	RETURNED	FROM		то		MILES	RATE	CHARGE	BREAKFAST	LUNCH	DINNER	TOTAL	REIMB TOTA	AL ACTUAL	REIMB TOTAL	CODE	TOTAL		
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IIIII	portati	ion An	a Other Ex	pense ood	ics mast	be compi	cica.			DOCUMENT TOTAL 0.0							0.00			
						ES OF THIS F														
					DISPATC	HER INFORM	PARE ANNUAL SALARY BOOK													
			CLAIM	IANT'S CER	TIFICATIO	ON				Transportation And Other Expense Codes (REQUIRED ABOVE) A - Air F - Local Phone R - Registration										
STATE B	USINESS	UNDER T	FOR WHICH PATHE AUTHORITY	OF THE LAW A	ND THAT THE	E CHARGES AF	RE REAS	ONAB	LE,	B - Bus/0	B - Bus/Cab L - Laundry S - Supplies									
					AIM HAS BEEN REIMBURSED OR PAID BY THE STATE, HE ROUTINE USES OF THIS FORM.					D - LD Phone P - Parking T - Tolls										
Commu	iting Mile	s	Yes	Trave		Yes			Other (Specify)											
					y Miles?	No							formation (If Applicable)							
TITLE									Document Number						Amount					
Vendo	r Num	ber																		
CLAIMANT'S SIGNATURE DATE											AGENCY AUTHORIZED SIGNATURE									
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Fund	Org	Prog	2423	2427	2450	2469	249	9												
	Total		-	-	-	-			-	-	-	-	-	-	-	-		-		
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