TRAVEL VOUCHER OR SUBVOUCHER				Read Privacy Act Statement, Penalty Statement, and Instructions on back before completing form. Use typewriter, ink, or ball point pen. PRESS HARD. DO NOT use pencil. If more space is needed, continue in remarks.											
× Ele	1. PAYMENT         SPLIT DISBURSEMENT: The Paying Office will pay directly to the Government Travel Charge Card (GTCC) contractor the portion of your reimbursement           Electronic Fund Transfer (EFT)         Electronic Fund Payment by Check         Pay the following amount of this reimbursement directly to the Government Travel Charge Card contractor:         S														
		Middle Initial) (Print		g announ		3. GRA		4. SSI			el Charge	_	OF PAYMENT (X as	applicable)	
								X TD'		Member/Employee					
6. ADDRESS. a. NUMBER AND STREET b. (			b. CITY				c. ST/	STATE d. ZIP CODE				Other			
													pendent(s)	DLA	
e F-MAII	ADDRESS												D.O. USE ONLY	55.	
e. E-MAIL ADDRESS 7. DAYTIME TELEPHONE NUMBER & 8. TRAVEL ORDER/AUTHORIZATION AREA CODE NUMBER				9. PREVIOUS GOVERNMENT PAYMENTS/ ADVANCES				ITS/	a. D.O. VOUCHER NUMBER						
11. ORGANIZATION AND STATION				-					b. SUBVOUCHER NUMBER						
12. DEPE	NDENT(S)	X and complete as	applicable)							RESS ON RECE	EIPT OF	c. PAID	BY		
	COMPANIEI			COMPA	NIED		ORDERS (Include Zip Code)								
		rst, Middle Initial)	b. RELATIO		c. DATE OF OR MARI	BIRTH									
					OR MARI	RIAGE									
								IOUSEH	OLD	GOODS BEEN	SHIPPED?	d COMP	UTATIONS		
							(X one) YES			NO (Explain in R	Pemarks)		UTATIONS		
15. ITINE	RARY						C.				,	SDECI	IALTY CARE	2	
a. DATE		b. PLACE <i>(Home, C</i> it	Office, Base, Act y and Country,	tivity, City etc.)	and State;		MEANS/ MODE OF TRAVEL	REASC FOR STOF		e. LODGING COST	f. POC MILES			ability Travel	
	DEP												<b>D</b>   <b>D</b>		
	ARR								_			Active	Duty Family	Member	
	DEP											D. J			
	ARR								_			Retire	e		
	DEP								_			D.C.	E 1 M	1	
	ARR DEP											Retire	e Family Men	iber	
	ARR											Other			
	DEP														
	ARR														
	DEP											e. SUMM	IARY OF PAYMENT		
	ARR											(1) Per D	iem		
	DEP											(2) Actua	I Expense Allowance	9	
	ARR											(3) Milea	ge		
16. POC	TRAVEL (X o	one) 🗙 OWI	N/OPERATE		PA	SSENGE	ĒR	17	. DUI	RATION OF TRA	AVEL	(4) Deper	ndent Travel		
18. REIM	BURSABLE	EXPENSES								12 HOURS OR L	FSS	(5) DLA			
a. DA	ſE	b. NATURE OF EXPENSE			c. AMO	UNT	d. ALLOW	/ED				(6) Reim	bursable Expenses		
	Lo	Lodging @								MORE THAN 12 HOURS BUT 24 HOURS OR LESS		(7) Total		0.00	
	Lo	Lodging Taxes							i			(,, ,			
	Me	Meals from DD1351-3							1	MORE THAN 24	HUIDS	(9) Amou	int Owed		
	Fu	Fuel									10010	(10) Amount Due			
	Par	Parking								19. GOVERNMENT/DEDUCTIBL					
	То	lls							ć	a. DATE	b. NO. C	F MEALS	a. DATE	b. NO. OF MEALS	
	Ai	Fare													
	Ca	r Rental													
		<u>ain/Taxi Fare</u>	S												
20.a. CL/	MANT SIG	NATURE												b. DATE	
C. REVIEWER'S PRINTED NAME d. REVIEWER SIG				GNATURE					e. TELEPHONE NUMBER f. DATE						
21.a. APPROVING OFFICIAL'S PRINTED NAME b. SIGNATURE									c. TELEPHONE NUMBER d. DATE						
22. ACCO TRO-1	22. ACCOUNTING CLASSIFICATION TRO-North POC 703-588-1867/1869														
23. COLLECTION DATA															
24. COM	PUTED BY	25. AUDITE	DBY	26. TRAV AUTHO	/EL ORDER DRIZATION I	POSTED	BY 27. RE	CEIVED	) (Pay	ee Signature and	d Date or C	heck No.)	28.	AMOUNT PAID	
DD FC	RM 13	51-2, MAR 2	2008			PR	EVIOUS E		MA)	Y BE USED		Exce	ption to SF 1012 app	proved byGSA/IRMS 12-9 Adobe Designer 7	

# **PRIVACY ACT STATEMENT**

AUTHORITY: 5 U.S.C. Section 5701, 37 U.S.C. Sections 404 - 427, 5 U.S.C. Section 301, DoDFMR 7000.14-R, Vol. 9, and E.O. 9397.

**PRINCIPAL PURPOSE(S)**: This record is used for reviewing, approving, accounting, and disbursing money for claims submitted by Department of Defense (DoD) travelers for official Government travel. The Social Security number (SSN) is used to maintain a numerical identification filing system for filing and retrieving individual claims.

**ROUTINE USE(S):** Disclosures are permitted under 5 U.S.C. 552a(b), Privacy Act of 1974, as amended. In addition, information may be disclosed to the Internal Revenue Service for travel allowances, which are subject to Federal income taxes, and for any DoD "Blanket Routine Use" as published in the Federal Register.

DISCLOSURE: Voluntary; however, failure to furnish the information requested may result in total or partial denial of the amount claimed.

## PENALTY STATEMENT

There are severe criminal and civil penalties for knowingly submitting a false, fictitious, or fraudulent claim (U.S. Code, Title 18, Sections 287 and 1001 and Title 31, Section 3729).

## INSTRUCTIONS

### **ITEM 1 - PAYMENT**

Member must be on electronic funds (EFT) to participate in split disbursement. Split disbursement is a payment method by which you may elect to pay your official travel card bill and forward the remaining settlement dollars to your predesignated account. For example, \$250.00 in the "Amount to Government Travel Charge Card" block means that \$250.00 of your travel settlement will be electronically sent to the charge card company. Any dollars remaining on this settlement will automatically be sent to your predesignated account. Should you elect to send more dollars than you are entitled, "all" of the settlement will be forwarded to the charge card company. Notification: you will receive your regular monthly billing statement from the Government Travel Charge Card contractor; it will state: paid by Government, \$250.00, 0 due. If you forwarded less dollars than you owe, the statement will read as: paid by Government, \$250.00, \$15.00 now due. Payment by check is made to travelers only when EFT payment is not directed.

### **REQUIRED ATTACHMENTS**

1. Original and/or copies of all travel orders/authorizations and amendments, as applicable.

2. Two copies of dependent travel authorization if issued.

3. Copies of secretarial approval of travel if claim concerns parents who either did not reside in your household before their travel and/or will not reside in your household after travel.

4. Copy of GTR, MTA or ticket used.

5. Hotel/motel receipts and any item of expense claimed in an

amount of \$75.00 or more.

6. Other attachments will be as directed.

#### ITEM 15 - ITINERARY - SYMBOLS

15c. MEANS/MODE OF TRAVEL (Use two letters)

GTR/TKT or CBA (See Note)	- T	Automobile	- A
Government Transportation		Motorcycle	- M
Commercial Transportation		Bus	- B
(Own expense)	- C	Plane	- P
Privately Ówned		Rail	- R
Convevance (POC)	- P	Vessel	- V

Note: Transportation tickets purchased with a CBA must not be claimed in Item 18 as a reimbursable expense.

#### 15d. REASON FOR STOP

Authorized Delay	- AD	Leave En Route - LV
Authorized Return	- AR	Mission Complete - MC
Awaiting Transportation	- AT	Temporary Duty - TD
Hospital Admittance Hospital Discharge	- HA - HD	Voluntary Return - VR

ITEM 15e. LODGING COST Enter the total cost for lodging.

#### **ITEM 19 - DEDUCTIBLE MEALS**

Meals consumed by a member/employee when furnished with or without charge incident to an official assignment by sources other than a government mess (see *JFTR*, par. U4125-A3g and JTR, par. C4554-B for definition of deductible meals). Meals furnished on commercial aircraft or by private individuals are not considered deductible meals.

## 29. REMARKS

a. INDICATE DATES ON WHICH LEAVE WAS TAKEN:

b. ALL UNUSED TICKETS (including identification of unused "e-tickets") MUST BE TURNED IN TO THE T/O OR CTO.