

TRAVEL VOUCHER (Temporary Duty Travel)

SECTION A -- IDENTIFICATION

1. TRAVEL AUTHORIZATION NO.	2. SOCIAL SECURITY NO.	3. NAME (Last) (First) (Middle Initial)					4. AGENCY CODE	
5. AGENCY ORIGINATING OFFICE NUMBER	6. TRAVELER ORIGINATING OFFICE NUMBER	7. DATES OF TRAVEL EXPENSES				8. TYPE CLAIM (Indicate one type only)		9. RECLAIM AMOUNT INCLUDED
		Month	Day	Year	Month	Day	Year	
10. LEAVE TAKEN Y = Yes N = No		11. TRAINING DOCUMENT NO. (For Purpose of Travel Code 3 Only)			12. OFFICIAL DUTY STATION CITY AND STATE		13. RESIDENT CITY AND STATE (If other than official station)	
14. POST APPROVAL INDICATOR Y = Yes N = No		15. TOTAL NIGHTS LODGING			16. NUMBER OF NIGHTS IN APPROVED ACCOMMODATIONS PER THE FIRE SAFETY ACT STANDARDS			

SECTION B -- TRAVEL VOUCHER MAILING ADDRESS OPTIONS

17. SALARY ADDRESS	19. SPECIAL ADDRESS	20. FOREIGN ADDRESS	21. TRAVEL EFT ACCOUNT
18. T&A CONTACT POINT			
1. (35)			
2. (35)			
3. City (20)		State (2)	Zip Code (9)

SECTION C -- TRANSPORTATION COSTS

22. METHOD OF PAYMENT	23. VENDOR/CARRIER	24. IDENTIFICATION NUMBER	25. CAR RENTAL		26. AMOUNT
			MILES	DAYS	
					\$

SECTION D -- CLAIMS

28. SUMMARY OF SUBSISTENCE					
COUNTRY CODE	CITY CODE	CITY or COUNTY	STATE	NO. OF DAYS	AMOUNT
					\$

If payment was made by traveler, complete Section G on reverse. **TOTALS** \$ **NFC USE**

27. AIRLINE ACCOMMODATIONS: Excess Fare (Check If Applicable) Non-contract (Insert Code)

29. PER DIEM No. of Days [] \$

SECTION E -- ACCOUNTING CLASSIFICATION

45. AUTHORIZATION ACCOUNTING (Check this block if accounting and purpose of travel code(s) from travel authorization are to be charged for the total voucher claim.)

46. DISTRIBUTED ACCOUNTING (Check this block distribute total claim from Section D to the applicable Purpose of Travel Code and Accounting Classification line.)

30. ACTUAL SUBSISTENCE No. of Days []

31. MILEAGE Rate [¢] Miles []

32. PARKING, TOLLS, ETC.

33. PLANE, BUS, TRAIN (Paid by Traveler)

PURPOSE CODE	ACCOUNTING CLASSIFICATION	PERCENTAGE
		%

THESE PERCENTAGES MUST EQUAL 100%

34. UNACCOMPANIED BAGGAGE

35. LOCAL TRANSPORTATION

36. MISCELLANEOUS EXPENSES

37. CAR RENTAL

38. TOTAL CLAIM (Blocks 29 thru 37) \$

SECTION F -- CERTIFICATION

FRAUDULENT CLAIM. Falsification of an item in an expense account will result in a forfeiture of the claim (28 USC 2514) and may result in a fine of not more than \$10,000 or imprisonment for not more than 5 years or both (18 USC 287; i.d. 1001).

CLAIMANT'S RESPONSIBILITIES AND SIGNATURE. I hereby assign to the United States any rights I may have against other parties in connection with any reimbursable carrier transportation charges described herein. I have received no payment for claims shown herein. All travel and reimbursable claims were incurred on official business of the United States Government. All tickets, coupons, promotional items and credits received in connection with travel claimed on this voucher have been accounted for as required by 41 CFR 301-304 and other regulations. I have reviewed this voucher and certify it to be correct.

39. TRAVEL ADVANCE AMOUNT OUTSTANDING

40. AMT. OF VOUCHER (Block 38) TO BE APPLIED TO OUTSTANDING ADVANCE (Block 39)

41. AMT. OF VOUCHER (Block 38) TO BE APPLIED TO OUTSTANDING BILL FOR COLLECTION

BILL NO.

42. ADDITIONAL ADVANCE AMOUNT REPAID (Check or money order attached)

47. CLAIMANT'S SIGNATURE

48. DATE Month Day Year

49. FINAL VOUCHER INDICATOR Y = Yes N = No

43. REMAINING ADVANCE BALANCE (Block 39 minus Block 40 and Block 42)

44. NET TO TRAVELER (Block 38 minus Block 40 and Block 41) \$

APPROVING OFFICER'S RESPONSIBILITIES AND SIGNATURE. In approving this voucher, I have determined that: (1) Reimbursement is claimed for official travel only; (2) Use of rental car, taxicab, or other special conveyance for which reimbursement is claimed is to the Government's advantage; and (3) Long distance phone calls and supplies or equipment purchased are necessary and in the interest of the Government. Note: To approve long distance phone calls, approving officer must have written authorization from Agency Head or his/her designee (31 USC 1348).

AUDITED BY (Examiner's Initials)

TOTAL DIFFERENCE

50. APPROVING OFFICER'S SIGNATURE			51. SOCIAL SECURITY NO		52. DATE APPROVED Month Day Year		53. PHONE (Area Code and No.)		
54. NAME AND TITLE (Last, First, Middle Initial) (Type or Print)				AGENCY CODE		55. CONTACT PERSON'S NAME		56. PHONE (Area Code and No.)	

Upon completion and approval, submit original voucher to:
USDA -- National Finance Center, P.O. Box 60000, New Orleans, LA 70160

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 Exception to SF 1012 approved by GSA 11/20/96

SOCIAL SECURITY NO.	TRAVELER'S NAME
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SECTION G -- SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED

ITINERARY FROM								TOTALS Transfer these totals to Section D on Voucher Front. If additional days are required, use continuation sheet
DATE (Month/Day)								
CITY								
STATE								
TIME								
TO TDY LOCATION								
DATE (Month/Day)								
CITY								
COUNTY								
STATE								
TIME								
PER DIEM								TOTAL NO. DAYS
NO. OF DAYS								
LODGING (Receipt Required)								
MEALS AND INCIDENTAL EXPENSES								
LESS MEALS AT GOVERNMENT EXPENSE								
PER DIEM AMOUNT								TOTAL PER DIEM \$
ACTUAL SUBSISTENCE								TOTAL NO. DAYS
NO. OF DAYS								
LODGING (Receipt Required)								
BREAKFAST								
LUNCH								
DINNER								
M&IE/OTHER								
ACTUAL SUBSISTENCE AMOUNT								TOTAL ACTUAL SUBSISTENCE \$
MILEAGE								TOTAL MILES
MILES								
RATE PER MILE	¢	¢	¢	¢	¢	¢	¢	
MILEAGE AMOUNT								TOTAL MILEAGE \$
PARKING, TOLLS, ETC.								TOTAL PARKING \$
PLANE, BUS, TRAIN (Paid By Traveler)								TOTAL PLANE, BUS, TRAIN \$
UNACCOMPANIED BAGGAGE								TOTAL UNACCOMPANIED BAGGAGE \$
LOCAL TRANSPORTATION								TOTAL LOCAL TRANSPORTATION
NO. TRIPS								
DAILY EXPENSE								\$
MISCELLANEOUS EXPENSES								TOTAL MISCELLANEOUS
TELEPHONE CALLS								
SUPPLIES, ETC.								\$
CAR RENTAL (Paid by Traveler) Receipt and Car Rental Agreement Required								TOTAL CAR RENTAL
RENTAL EXPENSE								
GASOLINE EXPENSE								\$

REMARKS

PRIVACY ACT NOTICE. The following information is provided to comply with the Privacy Act of 1974 (P.L. 93-579). The information requested on this form is required under the provisions of 5 USC, Chapter 57 (as amended) and Executive Orders 11609 of July 22, 1971, and 11012 of March 27, 1962, for the purpose of recording travel expenses incurred by the employee and to claim other entitlements and allowances as prescribed in the Federal Travel Regulations (41 CFR 301-304). The information contained in this form will be used by Federal Agency officers and employees who have a need for such information in the performance of their duties. Information will be transferred to appropriate Federal, State, local or foreign agencies, when relevant to civil, criminal, or regulatory investigations or prosecutions or pursuant to a requirement by GSA or such other agency in connection with the hiring or firing, or security clearance, or such other investigations of the performance of official duty in Government service. Failure to provide the information required will result in delay or suspension of the employee's claim for reimbursement.