

TRAVEL EXPENSE VOUCHER

AMERICAN POSTAL WORKERS
ACCIDENT BENEFIT ASSOCIATION

PO BOX 120
ROCHESTER NH 03867

(PLEASE PRINT)

Name: _____
Address: _____
Phone: _____

Assignment Date: _____
Purpose: _____

Please note: Receipts Must Be Attached For ALL Expenses Claimed in Sections 1, 2 and 3.

SECTION 1: (TRAVEL)

AIRFARE \$ _____
BUS/SHUTTLE \$ _____
TAXI \$ _____
AUTO RENTAL **SEE PAGE TWO (2)** \$ _____
GAS FOR AUTO RENTALS \$ _____
TOLLS \$ _____
PERSONAL VEHICLE: # MILES _____ @ **\$.50.5 cents per mile** \$ _____
OTHER: (EXPLAIN) _____ \$ _____

SECTION 2: (LODGING)

LODGING/HOTEL (ROOM, ROOM TAXES, & PHONE CHARGES ONLY) \$ _____

SECTION 3: (MISCELLANEOUS)

REGISTRATION FEE \$ _____
OTHER: (EXPLAIN) _____ \$ _____

SECTION 4: (INCIDENTALS)

DAYS _____ X \$75.00 PER DIEM LESS ANY ADJUSTEMENTS NECESSARY BY ABA

PLEASE SEE INSTRUCTIONS ON PAGE TWO (2)

To Be Totaled by ABA:

TOTAL SECTION 1 \$ _____
TOTAL SECTION 2 \$ _____
TOTAL SECTION 3 \$ _____
TOTAL SECTION 4 \$ _____

YOUR SIGNATURE

TITLE

ABA AUTHORIZED SIGNATURE

DATE

DATE

AUTO RENTAL GUIDELINES:

- * MUST HAVE PRIOR WRITTEN AUTHORIZATION FROM ABA OFFICE
- * ABA POLICY LIMITS PHYSICAL DAMAGE OF AUTOMOBILE TO \$30,000 THEREFORE, IF RENT A VEHICLE WORTH MORE THAN \$30,000 YOU ARE PERSONALLY LIABLE FOR DIFFERENCE
- * PERSONAL PROPERTY IS NOT COVERED (SHOULD BE COVERED BY YOUR HOME-OWNERS' POLICY)
- * IN ORDER FOR ABA PHYSICAL AND LIABILITY COVERAGE TO BE IN EFFECT MUST BE RENTED IN THE NAME OF THE ABA (OR AS LONG AS WHEN YOU SIGN FOR THE CAR YOU SIGN YOUR NAME AND ABA TITLE).
- * THE ABA PROVIDES THE ABOVE LISTED INSURANCE ON RENTAL VEHICLES AND WILL NOT REIMBURSE FOR ANY INSURANCE COVERAGE EFFECTED WITH CAR RENTAL AGREEMENT
- * THE ABA WILL NOT REIMBURSE GAS CHARGES PAID TO ANY AUTO RENTAL AGENCY. IF YOU ARE REQUIRED TO RE-FILL THE TANK, YOU MUST DO IT BEFORE RETURNING THE VEHICLE. GAS RECEIPTS WILL BE REIMBURSED.

\$75 DAILY PER DIEM: APPLIES WHEN AN INDIVIDUAL IS IN TRAVEL STATUS FOR A PERIOD OF AT LEAST EIGHT HOURS.

EXPENSES INCLUDE:

- * ALL DAILY MEALS (BREAKFAST, LUNCH, DINNER AND ALL SNACKS)
- * ALL TIPS (I.E. MAIDS, BELHOPS, PORTERS ETC.)
- * TRANSPORTATION TO AND FROM RESTAURANTS

IT DOES NOT INCLUDE:

- ☹ TAXI OR OTHER TRANSPORTATION FROM HOME TO AIRPORT AND AIRPORT TO HOME
- ☹ PARKING AT AIRPORT IF TRAVEL WAS BY PERSONAL VEHICLE
- ☹ DAILY HOTEL CHARGES AND TAXES

ALSO, IF YOU ARE IN TRAVEL STATUS AND RECEIVING A PER DIEM AND RECEIVE A MEAL FROM THE ABA, THE BILL WILL BE DIVIDED BY THE NUMBER OF PEOPLE ON THE BILL AND EACH PERSON'S PER DIEM WILL BE ADJUSTED ACCORDINGLY.

LODGING:

MEALS, BAR CHARGES, MOVIES, AND ANY OTHER MISCELLANEOUS CHARGES CHARGED TO THE HOTEL ROOM ARE YOUR RESPONSIBILITY. THE ABA ONLY PAYS FOR THE EXPENSE OF THE ROOM, ROOM TAXES, AND REASONABLE PHONE CHARGES. A DETAILED HOTEL BILL WILL BE REQUIRED FOR DOCUMENTATION AND REIMBURSEMENT