**PROJECT NAME**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PROJECT ID NUMBER**: **PROJ**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**REPORTING PERIOD**: **From** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **To** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **TRAVEL** | | | | | | |
| **Doc #** | **Attendee Name** | **Lodging Cost** | **Air fare/Mileage Cost** | **Per diem Meals Cost** | **Total Cost** | **Federal Share** | **Match Share** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  | **Total Cost** | | | | |  |  |

Instructions:

1. **Project Name & ID**: This information can be obtained from the Expense Reimbursement form.
2. **Reporting Period**: Identify the first and last day of the reporting period (month/day/year).
3. **Document Number**: Assign a number or letter to each bill/receipt/invoice and attach to this cover sheet.
4. **Attendee name:** Enter Employee attending conference, training, or other travel.
5. **Cost of Item:** Enter cost of each item.
6. **Amount for this Reimbursement:** Enter total grant expenditures.
7. **Match Amount for this Item:** Enter total match associated with each item (where applicable).
8. **Provide a Travel Log**: Provide dates of travel, traveler’s name, destination, and mileage.
   * All reimbursement requests for travel, lodging and subsistence (per diem – i.e., hotel and meals) must be on a form that is signed by BOTH the employee and the supervisor. Hotel receipts must be submitted as supporting documentation.
9. **Using State of NC per diem**: Hotel receipts are required (to a maximum of $75.10 in-state and $88.70 out of state, plus tax unless prior permission for an excess amount is obtained). The traveler is authorized for $8.60 for breakfast, $11.30 for lunch and $19.50 in-state/ $22.20 for out-of-state dinner. State mileage rate is .58 per mile. (**These rates are in effect as of July 2019.)**
10. **Using GRANTEE agency’s per diem**: Submit copy of travel policy to the Grants Management Specialist at the beginning of the grant period. Follow grantee’s written policy. If the agency’s Travel Policy is updated, submit a revised version. Expenses may not exceed the established State Rates.