



## Professional Travel

Name: Tammy Meinershagen

**ORG Code**

**OBJ Code****Proj Code**

**11016000**

**69500**

11016000	69500	

If does not have Employee # check option below

City Board ☐

Other (explain)

Purpose: Trip to Orlando & Tampa, to tour their Performing Arts Center

Return Date: 12/07/23

Expenses incurred by employee:	\$336.38
Plus Prepaid or Billed:	0.00
Trip Total:	336.38
Less travel advance (subtracted from expenses incurred):	0.00
Amount due (TO) or FROM the City:	<b>\$336.38</b>

Director's Signature (Before Trip)

Employee Signature (Before Trip)

**Remember:** First and last days of travel are reduced, per GSA guidelines.

**I certify that the expenses outlined above were incurred by me in the conducting of city business and are true and correct to the best of my knowledge.**

Tammy Meinershagen  
Employee Signature (After Trip)

Director's Signature (After Trip)

Approved for Payment

Date	Amount
Total	\$0.00

**GRAND  
BOHEMIAN  
HOTEL  
ORLANDO**

Ea Hoppe  
6101 Frisco Square Blvd  
Frisco TX 75034  
United States of America

Room Number: 1214  
Arrival Date: 12-06-23  
Departure Date: 12-07-23  
CRS Number: 73761287  
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*Guest Name:*

**INFORMATION INVOICE**

A/R No:  
Folio No: 28739

12-14-23

Date	Description	Charges	Credits
12-06-23	Room Charge	299.00	
12-06-23	Room Sales Tax	19.44	
12-06-23	Lodging Tax	17.94	
12-07-23	Master Card / Euro Card XXXXXXXXXXXXXXX6531 XX/XX		336.38
Total		336.38	336.38
Balance		0.00	