

**Texas Police Chiefs Association Foundation
Law Enforcement Recognition Program**

Travel Invoice

Name: _____ Title: _____

Mailing Address: _____

City, State, and Zip: _____

Department/Agency _____

Dates of Travel: From _____ To _____

Location and Purpose: _____

Transportation - Method of Travel: ___ Air ___ City Vehicle ___ Personal Vehicle

Airfare: (Attach Receipt) \$ _____

Mileage _____ @ \$.58 per mile \$ _____

Other: (Attach Receipts) \$ _____

Lodging costs: (Attach Receipt) \$ _____

Meals: (up to \$40 per travel day) \$ _____
(Attach meal log – page 2 below)

Other Expenses: _____

_____ \$ _____

Total Travel Expenses Claimed \$ _____

Signature: _____ Date: _____

Office Use Only

Date Received: _____ Amount approved: _____

Date Paid: _____ Check Number: _____ By: _____

Charge to: _____ Recognition Program _____ Candidate Agency

Notes:

Please send completed invoice to: **Texas Police Chiefs Association
P.O. Box 1030
Elgin, Texas 78621**

TPCAF Recognition Program – Meal Log

Name: _____ Dates: _____

Itinerary: _____

(Note: Please record actual amount used plus tip, not to exceed \$40 per day.)

Date	Amount (limit of \$40 per day)*
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
Total	_____

- TPCA travel policy now reimburses up to \$40 per day. Meals are no longer broken out by breakfast, lunch, dinner.

Updated – October 7, 2019