OMES FORM 19 (Revised 11/22)			AG		BUSIN	ESS			CLAIM OF:					
OKLAHOMA FOR AGENCY USE			UNIT						Vendor I.D. #:					
Travel Voucher	. 552.16.1 552.								Address:					
	IN-STATE					OUT-OF-STATE			FOR					
IS CAR GOV. OWNED? OBJECT AC			CCT AMOUNT			OBJECT ACCT AMOUNT								
OWNLD:	521110 Mile	age			521210 Mileage						\$			
YES	521120 Per			521220 Transp				AGAINST		AINST				
NO 521130		lic Trans			521230 Per Diem				Agency, Bd.,					
	521140 Misc				521240 Local Trans				Comm., I	Comm., Dept.				
IS CLAIMANT A STATE 521150 Lodging		ging			521250 Misc.				ASSIGNMENT					
OFFICIAL OR					521260 Lodging				I hereby assign this claim to					
EMPLOYEE?	NON-EMP		LOYEE											
YES 521310 All Travel		ravel							and authorize the State Treasurer to issue a warrant in payment			nt in payment		
NO	Sub-Total		\$		Sub	-Total	\$	;		to said assignee.				
					Total Amount		\$		]					
DUTY STATION ADDRESS:	NATURE OF	OFFICIAL	BUSINES	S:					]					
									Claimant Signature					
						Date								
Show city/town point travel st each point visited and the point		Year	2025	Milean	e Claimed	Me	eals Provid	ed	CLAIM	ING PE	R DIEM?		Lodging	
ended. (For mileage - see		Mo.	Day	wiiioag	o olalinoa	Breakfast	Lunch	Dinner	Rate	Base	Meals	Total	Amount	
									68.00					
									68.00					
									68.00					
									68.00					
									68.00					
									68.00					
									68.00					
									68.00					
									68.00					
IF CLAIMING PER DIEM ENTER									68.00					
LAST DATE OF TRAVEL ON									68.00					
THIS LINE ONLY>									68.00					
Mileage Instructions: For detailed mileage (addresses, odometer readings) please use		TOTA	L MILES							PER DIEM TOTAL				
Page Two of the OMES Form 19.		RATE (F	PER MILE)	\$	0.70					LODGING TOTAL				
			\$							R TRIP OPTIMIZER ADJUSTMENT				
Trip Op	timizer Used	d for Milea	age Comp	arison		Exempt f	rom Trip (	Optimizer	Х	(Place 'X' ir	appropriate b	oox per Title 7	4, § 85.45l)	
	* N	flust be lo	west amo	ount fror	n the Trip	Optimizer	results. (N	Multiple tri	ps total if	necessary)				
>>MUS	T ATTACH	COPY OF	TRIP OPTI	MIZER F	ESULTS T	O THE VOU	ICHER. (AI	LSO, UNA\	/AILABILIT	Y NOTICE O	F RENTAL C	AR) <b>&lt;&lt;</b>		
	>>	For accu	ırate resu	lts the	optimizer	calculation	on must k	be perfori	med prior	to trip <<				
ITEMIZED LOCAL TRA	ITEMIZED MISCELLANEOUS COSTS						PUBLIC TRANSPORTATION							
TAXI:	REGISTRATION FEE:													
SHUTTLE:	TELEPHONE:									-				
RENTAL CAR:	PARKING:						TOTAL PUBLIC TRANSP.:							
OTHER LOCAL TRANSP:	TOLLS:						TOTAL ITEMIZED MISC.							
	COSTS:	TOTAL LOCAL TRA					TRANSP.							
							1							
l,		, by <u>s</u>	signing	here d	do unde	r penalty	· <del></del>							
of perjury, declare that	document	and any	Claim	ant Signa	ture				Date					
attachments are true an	d correct t	to the b	est of n	ny kno	wledge a	nd belief.	ļ							
			Manager's Appro										Date	