

Document Header Information

| | | | |
|------------------------------|------------------------------------|------------------|---|
| Document Type: | Voucher | Document Name: | VCH18064812 |
| Travel Authorization Number: | 101083696 | Trip Name: | West Palm Beach, FL - Travel w/SECVA for site visit and meeting |
| TA Date: | 02/28/18 | Currency: | USD |
| Organization: | VAVACO 101 OFFICE OF THE SECRETARY | Current Status: | PAID |
| Purpose: | SITE VISIT | Document Detail: | West Palm Beach, FL - Travel w/SECVA for site visit and meeting |
| Type Code: | REGULAR TDY | | |

Traveler Profile

| | | | |
|--------------------|---|------------------|------------------------------------|
| Name: | O'ROURKE, PETER Michael | ID: | (b) (6) |
| TID: | (b) (6) | Organization: | VAVACO 101 OFFICE OF THE SECRETARY |
| Title: | Chief of Staff | Duty Station: | |
| Security Cl: | | Card: | IBA HLDR NON EXEMPT |
| Office Address: | 810 Vermont Ave NW Washington, DC 20420 | EMAIL: | Peter.ORourke@va.gov |
| Office Phone: | 202823 (b) (6) | Cell Phone: | |
| Home Address: | (b) (6) | Home Phone: | |
| Alternate Address: | | Alternate Phone: | |

Document Information

| | | | | |
|---------------------|---|---------------------|------------|----------------|
| Trip Number: | 1 | | | |
| Purpose: | West Palm Beach, FL - Travel w/SECVA for site visit and meeting | | | |
| Itinerary Locations | | | | |
| From | To | Itinerary Location | Purpose | Per Diem Rates |
| 02/27/18 | 02/27/18 | WEST PALM BEACH, FL | SITE VISIT | 195.00 / 59.00 |

Document Totals

| | |
|----------------------------|--------|
| Total Expenses: | 524.84 |
| Reimbursable Expenses: | 44.25 |
| Non-Reimbursable Expenses: | 480.59 |
| Advance Applied: | .00 |
| Net to Traveler: | .00 |
| Net to Government: | 480.59 |
| Pay to Charge Card: | 44.25 |

Document Totals by Expense Category

| Expense Category | Cost | Advance Amount |
|------------------|--------|----------------|
| Com. Carrier | 465.84 | .00 |
| M&IE-Per Diem | 44.25 | .00 |
| Transxn Fees | 14.75 | .00 |
| Total Expenses: | 524.84 | .00 |

Trip 1 Details

| Expenses | | | | | | |
|------------|------------------------------|---------------|--------|--------------------------|----------|-------|
| Trip#: | Total Non-Per Diem Expenses: | | 480.59 | Total Per Diem Expenses: | | 44.25 |
| Date | Description | Category | Cost | Pay Method | Per Diem | |
| 02/27/2018 | Airline Flight | Com. Carrier | 465.84 | CBA | | |
| 02/27/2018 | M&IE | M&IE-Per Diem | 44.25 | IBA | | * |
| 02/28/2018 | TDY Voucher Fee | Transxn Fees | 14.75 | CBA | | |

Per Diem Allowances

| | | | | | | |
|------------|----------------------------|----------|-------------|-----------|--------------|-------------|
| Trip#: 1 | Total Per Diem Allowances: | | | | | 44.25 |
| Date | Rate | Ldg Cost | Ldg Allowed | M&IE Cost | M&IE Allowed | B L D Conf% |
| 02/27/2018 | 195.00/ 59.00 | 0.00 | 0.00 | 44.25 | 44.25 | |

Account Summary for the Selected Trip

| | | | |
|---|------------------------|--|--------|
| Org: VAVACO 101 OFFICE OF THE SECRETARY | Label: VAVACO 101 OSVA | Acct Code: 000000A0011010004 0142A1101 18/2172 | 524.84 |
| Expense Category: Com. Carrier | Fiscal Year: 2018 | Amount: 465.84 | |
| Expense Category: M&IE-Per Diem | Fiscal Year: 2018 | Amount: 44.25 | |
| Expense Category: Transxn Fees | Fiscal Year: 2018 | Amount: 14.75 | |
| Total: | | | 524.84 |

Payment Detail Information

| Organization | Label | Accounting String | Payment Method | Amount |
|------------------------------------|-----------------|-------------------------------------|----------------|--------|
| VAVACO 101 OFFICE OF THE SECRETARY | VAVACO 101 OSVA | 000000A0011010004 0142A1101 18/2172 | CBA | 480.59 |
| VAVACO 101 OFFICE OF THE SECRETARY | VAVACO 101 OSVA | 000000A0011010004 0142A1101 18/2172 | IBA | 44.25 |

Totals by Label

| | | | |
|------------------------------------|-----------------------|-------------------------------------|--------|
| VAVACO 101 OFFICE OF THE SECRETARY | VAVACO 101 OSVA Total | 000000A0011010004 0142A1101 18/2172 | 524.84 |
|------------------------------------|-----------------------|-------------------------------------|--------|

Totals by Payment Method

| | |
|-----------|--------|
| CBA Total | 480.59 |
| IBA Total | 44.25 |

Attachments

Attachments Exist

Receipt Checklist

| Date | Description | Cost |
|----------|--------------------|----------|
| 02/27/18 | AIR Airline Flight | \$465.84 |

Audits

| Audit Name | Result | Reason |
|------------|--------|--------|
|------------|--------|--------|

Document History 07/19/2018 Voucher: VCH18064812

Copyright 1989-2009 Concur Government Edition: Concur Inc. O'ROURKE, PETER Michael. (b) (6)

| STATUS | DATE | TIME | SIGNATURE NAME | REASON |
|-----------|------------|------------|-------------------------|--------|
| CREATED | 02/28/2018 | 11:32AMEST | (b) (6) | |
| SIGNED | 03/01/2018 | 1:21PMEST | O'ROURKE, PETER Michael | |
| ADJUSTED | 03/06/2018 | 8:05AMEST | (b) (6) | |
| CERTIFIED | 03/06/2018 | 3:48PMEST | (b) (6) | |
| REVIEWED | 03/07/2018 | 4:19AMEST | (b) (6) | |
| COMPLETE | 03/07/2018 | 4:42AMEST | (b) (6) | |
| PENDING | 03/07/2018 | 4:42AMEST | SYSUTILITY | |
| PAID | 03/07/2018 | 4:43AMEST | User1, EAI | |

I certify that the electronic signatures listed above are valid and on file

SIGNED DATE**Document Signatures**

Traveler/Preparer Name: _____

Traveler/Preparer Signature: _____

Date: _____

Approver Name: _____

Approver Signature: _____

Date: _____

COSVA TRAVEL

Attached is the Chief of Staff's Travel vouchers: **Please review, initial and return.**

| <u>Date(s)</u> | <u>Location</u> | <u>Amount to Card</u> | <u>Amount to Traveler</u> |
|----------------|---------------------|-----------------------|---------------------------|
| 2/27/2018 | West Palm Beach, FL | \$0 | \$44.25 |

← CAN ALL GO TO CARD?

Note:

1. Day trip 12-24hour.

If there are any questions, please let me know.

V/R,

(b) (6)

(b) (6)



DULUTH TRAVEL INCORPORATED

SERVICE DISABLED VETERAN OWNED SMALL BUSINESS

Duluth Travel, Inc.
2860 Peachtree Ind. Blvd., S
Duluth, GA 30097
Phone: (770) 813-9895 Fax:

Thursday, 22FEB 2018 10:10 AM EST

Passengers: PETER OROURKE (101O83696/101O83696)

Agency Reference Number: MFYHOB

Click here to view your current itinerary or ETicket receipt on-line: (b) (4), (b) (6), (b) (5)

| | | | |
|--|----------------------------|----------------------------------|------------------------|
| AIR | Tuesday, 27FEB 2018 | | |
| American Airlines | | Flight Number: 1849 | Class: G-Coach/Economy |
| From: Washington Reagan Natl DC, USA | | Depart: 11:30 AM | |
| To: West Palm Beach FL, USA | | Arrive: 02:08 PM | |
| Stops: Nonstop | | Duration: 2 hour(s) 38 minute(s) | |
| Equipment: Airbus Jet | | Status: CONFIRMED | Miles: 861 / 1378 KM |
| DEPARTS DCA TERMINAL C | | MEAL: FOOD FOR PURCHASE | |
| American Airlines Confirmation number is SFYFAN | | | |
| AIR | Tuesday, 27FEB 2018 | | |
| American Airlines | | Flight Number: 2756 | Class: G-Coach/Economy |
| From: West Palm Beach FL, USA | | Depart: 07:50 PM | |
| To: Washington Reagan Natl DC, USA | | Arrive: 10:19 PM | |
| Stops: Nonstop | | Duration: 2 hour(s) 29 minute(s) | |
| Equipment: Boeing 737-800 Jet | | Status: CONFIRMED | Miles: 861 / 1378 KM |
| ARRIVES DCA TERMINAL C | | MEAL: FOOD FOR PURCHASE | |
| American Airlines Confirmation number is SFYFAN | | | |

Ticket/Invoice Information

Ticket for: PETER OROURKE
Date issued: 02/22/2018 Invoice nbr: 568792
Ticket Nbr: 0017096844886 Electronic Tkt: Yes Amount: (b) (4) USD
Form of Payment: VI***** (b) (6), (b) (5)

Service Fee: PETER OROURKE
Date issued: 02/22/2018 Invoice Nbr: 568792

Document Nbr: 8900740445910

Amount: (b) (4) USD

Form of Payment: VI***** (b) (5) (b) (6)

Base Fare: 357.20
Tax: (b) (4)
Air Fare: (b) (4)
Total Air Fare: (b) (4)
Service Fee: (b) (4)
Total Invoiced: 465.84

Click here 24 hours in advance to obtain boarding passes:

[American](#)

Click here to review Baggage policies and guidelines:

[American](#)

ZPIZAMERICAN AIR TICKET WAS CHARGED TO VI XXXXXXXXXXXXX (b) (5)
ZPIZAMERICAN AIR ELECTRONIC TICKET NUMBER IS 0017096844886
ZPIZINVOICE NUMBER IS 568792
ZPIZSERVICE FEE*****\$ (b) (4)
ZPIZTICKETED FARE*****\$ (b) (4)
ZPIZTOTAL CHARGE*****\$465.84
CB/CGEBILLING/ATRS/2018-02-22T15.09.00Z

DUE TO RECENT CHANGES IN THE GOV CITY PAIR PROGRAM
YOUR AIR RESERVATIONS ARE SUBJECT TO CANCELLATION
BY THE AIRLINES IF NOT TICKETED AT LEAST 48 HOURS
PRIOR TO SCHEDULED DEPARTURE. PLEASE ENSURE ALL
NECESSARY APPROVALS ARE PROCESSED IN ACCORDANCE
WITH YOUR AGENCY'S BUSINESS RULE BUT NO LESS THAN 3
BUSINESS DAYS PRIOR TO DEPARTURE. THIS 48 HOUR
CANCELLATION RULE DOES NOT APPLY TO YOUR
INTERNATIONAL RESERVATIONS UNLESS YOUR TRIP HAS
DOMESTIC CONNECTIONS ON MORE THAN ONE AIRLINE OR
THESE RESERVATIONS WILL REQUIRE SEPARATE TICKETS.

101083696

**For travel agent assistance and emergencies, please call 1-877-813-5900.

Your TMC Code is "11T" Duluth Travel

Normal business hours are from 7am to 10pm EST. Mon-Fri

Except weekends and Federal holidays

All ticketed itinerary changes are \$ (b) (4)
