

CITY OF GULF BREEZE PER DIEM TRAVEL ADVANCE REQUEST

Complete if requesting per diem prior to travel. *When a meal is included within a registration fee no per diem is allowed.*

EMPLOYEE NAME (PRINT): _____

DATE OF REQUEST: _____

TOTAL AMOUNT REQUESTED FROM PER DIEM MEAL CHART: _____

DESTINATION: _____

PURPOSE: _____

DEPARTURE DATE & TIME: _____

RETURN DATE & TIME: _____

The above employee requests that the approved per diem be paid to him/her in advance of travel departure date. By signing below, the employee acknowledges that acceptance of travel per diem in advance is intended for the stated approved travel above. If the event is cancelled or the employee otherwise is unable to attend the travel/training event, all or some of the advanced per diem will then be required to be returned to the City.

Employee Signature: _____ Date: _____

Department Head Signature: _____ Date: _____

****Must attach Per Diem Travel Advance Request form & agenda. If no agenda is available, please submit registration info showing the dates and times of the training.****