EMPLOYEE VOUCHER – TRAVEL AND OTHER (CONTINUATION)
CO-17XP REV. 10/22/07 (Electronic Version)

NAME OF PAYEE	BANNER ID (NOT SSN#)	PERIOD OF TRAVEL	TA # (IF APPLICABLE)

DATE	TRAVEL		TRAVEL BY AUTOMOBILE ___ STATE VEHICLE ___ PERS. VEHICLE				CARRIER	REG	LODGING	MEALS	MISC
	FROM	TO	MISC PARKING, TOLLS	AMT	NO. OF MILES	AMT AT	AMT	AMT	AMT	AMT	AMT
							GRAND TOTAL (INCLUDE ON CO-17XP PG 1)				