FORT BEND COUNTY
Travel Expense Reimbursement Report/Transmittal

Name: Adele Janczak **SSN or Vendor #** _____ **Department:** County Attorney

Funding Source #1: 100475100 (Accounting Unit) 63200 (Account Number) _____ (Activity) if applicable _____ (Reporting Category) if applicable

Funding Source #2: (if applicable) _____ (Accounting Unit) 63200 (Account Number) _____ (Activity) if applicable _____ (Reporting Category) if applicable

Purpose of Travel: _____ **Destination:** _____

Date/Time Departure of FBC _____ **Date/Time Arrival at FBC** _____

Means of Transportation ☐ Personal Vehicle ☐ County Vehicle ☐ Airline ☐ Carpool **Rental Car at Destination** ☐ Yes ☐ No

Hotel Prepaid ☐ Yes ☐ No **Refund due from Hotel** ☐ Yes ☐ No **Cash Receipt Deposit #** _____

Any expenses reimbursed by another agency? (State) ☐ Yes ☐ No **Agency:** _____

Any expenses charged on the PCARD? ☐ Yes ☐ No **If Yes, list expenditures** _____

Proof of payment must be attached for items prepaid by check or on the Procurement Card (hotel, airfare, rental car, conf. registration etc.)

Date(s)	Merchant/Location/Description For Mileage Reimbursement list starting and ending destination	Mileage	Misc. Expenses
	Per Diem Total (if applicable)		
03/08/23	Rosenberg Office to Courthouse and back for Cluster Court	6.80	
3//9/2023	Rosenberg Office to Courthouse and back for 328th Docket	6.80	
03/20/23	Rosenberg Office to Courthouse for Cluster Court for Trial	6.80	
03/22/23	Rosenberg Office to Courthouse and back for Cluster Court	6.80	
04/05/23	Rosenberg Office to Courthouse and back for Cluster Court	6.80	
04/12/23	Rosenberg Office to Courthouse and back for Cluster Court	6.80	
04/19/23	Rosenberg Office to Courthouse and back for Cluster Court	6.80	
04/20/23	Rosenberg Office to Courhouse and back for 328th hearing	6.80	
04/26/23	Rosenberg Office to Courthouse and back for Cluster Court	6.80	
05/10/23	Rosenberg Office to Courthouse and back for Cluster Court	6.80	
05/17/23	Rosenberg Office to Courthouse and back for Cluster Court	6.80	
06/07/23	Rosenberg Office to Courthouse and back for Cluster Court	6.80	
06/14/23	Rosenberg Office to Courthouse and back for Cluster Court	6.80	
06/21/23	Rosenberg Office to Courthouse and back for Cluster Court	6.80	
07/10/23	Rosenberg Office to Mail Center	6.80	
07/12/23	Rosenberg Office to Courthouse and back for Cluster Court	6.80	
07/21/23	Rosenberg Office to main office and back	6.80	
08/02/23	Rosenberg Office to Courthouse and back for Cluster Court	6.80	
08/16/23	Rosenberg Office to Courthouse and back for Cluster Court	6.80	
	Total Miles	129.20	
	x Mileage Rate	0.655	
	Subtotals	$84.63 (63200)	$0.00 (63200)

Out of State Approval Date by Commissioners' Court _____
(Attach copy of minutes with reimbursement)

Total Reimbursement **$84.63**

The undersigned hereby certifies that mileage and expenses listed above were incurred on official county business only, and that reimbursement has not been received for any part thereof.

Employee Signature: Adele Janczak **Date:** 1-25-2024

Department Head/ Elected Official Signature Maryse W Hancock **Date:** 1/25/2024

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Date/Time Departure of FBC _____ **Date/Time Arrival at FBC** _____

Means of Transportation ☐ Personal Vehicle ☐ County Vehicle ☐ Airline ☐ Carpool **Rental Car at Destination** ☐ Yes ☐ No

Hotel Prepaid ☐ Yes ☐ No **Refund due from Hotel** ☐ Yes ☐ No **Cash Receipt Deposit #** _____

Any expenses reimbursed by another agency? (State) ☐ Yes ☐ No **Agency:** _____

Any expenses charged on the PCARD? ☐ Yes ☐ No **If Yes, list expenditures** _____

Proof of payment must be attached for items prepaid by check or on the Procurement Card (hotel, airfare, rental car, conf. registration etc.)

Date(s)	Merchant/Location/Description For Mileage Reimbursement list starting and ending destination	Mileage	Misc. Expenses
	Per Diem Total (if applicable)		
08/23/23	Rosenberg Office to Courthouse and Back	6.80	
09/06/23	Rosenberg Office to Courthouse and Back	6.80	
09/11/23	Rosenberg Office to Courthouse and Back	6.80	
09/11/23	Courthouse to Rosenberg Office and Back	6.80	
09/13/23	Rosenberg Office to Courthouse and Back	6.80	
09/20/23	Rosenberg Office to Courthouse and Back	6.80	
10/04/23	Rosenberg Office to Courthouse and Back	6.80	
10/11/23	Rosenberg Office to Courthouse and Back	6.80	
10/18/23	Rosenberg Office to Courthouse and Back	6.80	
11/01/23	Rosenberg Office to Courthouse and Back	6.80	
11/15/23	Rosenberg Office to Courthouse and Back	6.80	
11/17/23	Rosenberg Office to Courthouse and Back	6.80	
12/06/23	Rosenberg Office to Courthouse and Back	6.80	
12/13/23	Rosenberg Office to Courthouse and Back	6.80	
01/09/24	Rosenberg Office to Courthouse and Back	6.80	
01/10/24	Rosenberg Office to Courthouse and Back	6.80	
01/16/24	Rosenberg Office to Courthouse and Back	6.80	
01/17/24	Rosenberg Office to Courthouse and Back	6.80	
	Total Miles	122.40	
	x Mileage Rate	0.655	
	Subtotals	$80.17 (63200)	$0.00 (63200)
	Total Reimbursement	**$80.17**	

Out of State Approval Date by Commissioners' Court _____
(Attach copy of minutes with reimbursement)

The undersigned hereby certifies that mileage and expenses listed above were incurred on official county business only, and that reimbursement has not been received for any part thereof.

Employee Signature: Adele Janczak **Date:** 1-25-2024

Department Head/ Elected Official Signature Maggie W. Hancock **Date:** 1/25/2024