STATE OF NEW YORK STATEMENT OF AUTOMOBILE TRAVEL

	(Submit with travel expense voucher)		Subvoucher No.					
************	(Department, Commission or Other Agency)							
PAYEE		*******	Sheet No.					

Date	Between What Points		Meals	Hour of Departure		Hour of Arrival		Miles
	From	То	Only*	A.M.	P.M.	A.M.	P.M.	Traveled
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		<u> </u>	<u> </u>	<u> </u>	L		tal Miles	

*Enter meals not included in per diem; B for breakfast, D for dinner.

I hereby certify that the travel indicated was necessary and on official business of the State.

Signature of Traveler