



RTAP Reimbursement

Air, Rail and Transit Office
 S.D. Department of Transportation
 700 E. Broadway Ave.
 Pierre, SD 57501-2586

RTAP #

Organization Name

Traveler name(s) (Include all travelers.)							
Purpose of travel							
Transit project physical address							
Destination physical address							
License plate # (needed to claim mileage)							
Total miles in project vehicle		@ \$0.295/mile					
Total miles in personal vehicle		@ \$0.655/mile					
	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	
Date							
Depart time*	am pm	am pm	am pm	am pm	am pm	am pm	
Return time*	am pm	am pm	am pm	am pm	am pm	am pm	
Meal costs							
Lodging cost (if direct bill, enter 0)							
Misc. costs							
Total costs							

*Include date and time of departure and return. Note any time zone changes.

Submitted by

Reimbursable amount

_____ SDDOT use only

Attachment checklist

- Conference or course agenda (showing which meals are included in registration or course fees)
- Hotel receipts
- Registration or course fee receipt
- Receipts for other expenses (excluding meals)

Meal times and rates

Breakfast	leave before 5:30 a.m., return after 8 a.m.	In S.D.	Outside S.D.
Lunch	leave before 11:30 a.m.	\$6.00	\$10.00
Dinner	leave before 5:30 p.m., return after 8 p.m.	\$14.00	\$18.00
		\$20.00	\$28.00

Questions?

Monte Meier Monte.Meier@state.sd.us 605-773-4169
 Terri Geigle Terri.Geigle@state.sd.us 605-773-3014

To email this form, please save a copy of this form to your computer and email using the "email" button from the saved copy. You may also print a copy and mail to the address located at the top of this form.