

# Travel Request

[HELP](#)

## 1. Employee Information

Employee Name	Gretchen Flicker	Dept.	Retirement Services
Job Title	PF Board Trustee	Visible Code	
Employee ID		Home Zip Code	
Hourly / Salaried	<input type="radio"/> Hourly <input checked="" type="radio"/> Salaried	Select Purpose	<input checked="" type="radio"/> In-State <input type="radio"/> Out-of-State
			Phone No.

## 2. Group Travel

Yes  No

Names of other Travelers		
Anurag Chandra	3	5
	4	6

## 3. Travel Itinerary

Event Name:	2026 Public Funds Roundtable		
Event Location:	The Beverly Hilton	City:	Los Angeles
Departure Date:	4/27/26	Event Start Date:	4/27/26
		Event End Date:	4/29/26
		Return Date:	4/30/26
		State:	CA

## 4. Estimated Travel Expenses

Category	Detailed Description	Estimated Expense Amounts
Registration	2026 Public Funds Roundtable	\$0.00
Airfare	SFO to LAX, LAX to SFO via Delta Airlines \$239 + \$70 checked bag fee	\$309.00
Lodging	The Beverly Hilton 4/27 - 4/30	\$934.48
Ground Transportation	Uber - Home to SFO, LAX to Hotel, Hotel to LAX, SFO to Home	\$206.78
Per Diem <small>(from worksheet)</small>	Conference provides: 2 breakfast, 2 lunch, 2 dinner	\$74.50
Parking		
Other		
<b>Total Estimated Expenses</b>		<b>\$1,524.76</b>

## 5. Cash Advance Requested

Cash advance requested?  Yes  No

I am requesting a cash advance for Per Diem in accordance with the [City Policy Manual, Section 1.8.2. \(4.3\)](#) and acknowledge my responsibility to file a Reimbursement of Travel within 14 days after the Return Date entered above. Should I not fulfill my obligation to file a reimbursement within this timeline, I hereby authorize the City to deduct the amount of this advance from my wages. I have read and understand the [City's Travel Policy](#) and that this Statement complies with the policy and its intent.

## 6. Notes

Lodging - Due to the late end time of the conference on April 29, Traveler requested an additional night of lodging. Departure will be early morning on April 30.

## 7. Certification

I certify that the requested travel is complete and prepared in accordance with the City's Travel Policy and that the estimated expenses will be incurred for the purpose of City business.

Employee	<i>Gretchen Flicker</i>	Gretchen Flicker	3/24/26
Emp ID #	Signature	Print Name	Date

I certify that I have evaluated the requested travel activity and confirm that the request is complete and prepared in accordance with the City's Travel Policy and that the estimated expenses will be incurred for the purpose of City business.

Direct Supervisor	<i>Andrew Gardanier</i>	Andrew Gardanier	3/24/26
Emp ID #	Signature	Print Name	Date

I certify that I have evaluated the requested travel activity and confirm that the estimated expenses will be incurred for purposes of City business, are in compliance with the City's Travel Policy and are within budgetary limits.

Travel Coordinator			
Emp ID #	Signature	Print Name	Date

I certify that I have evaluated the requested travel activity and confirm that the estimated expenses will be incurred for purposes of City business, are in compliance with the City's Travel Policy and are within budgetary limits.

Approving Official			
Emp ID #	Signature	Print Name	Date