How to Complete the DD1351-2 (Travel Voucher)

Revised May 2022

Block Instructions

- 1 Put an "X" in the Electronic Fund Transfer (EFT) box. Split disbursement is optional or those using a Government Travel Card (GTC). If split disbursement is chosen, write in the amount you want to be sent to your GTC account.
- 2-4 Enter your name, grade (if applicable) and Social Security Number (SSN). Omit SSN if emailing.
 - **5** Select the OTHER box.
 - **6** Enter your physical address and email address.
 - 7 Enter a complete duty, work or home (DAYTIME) phone number to include area code.

8-10 LEAVE BLANK

- 11 Put "TRICARE CRDT Benefit Program".
- 12 These blocks are used if the traveler was accompanied by a NMA or patient during the trip. If this form is for the NMA, the patient's name is entered here. If this form is for the patient, the NMA name is entered here.

13-14 LEAVE BLANK

- 15 Itinerary must be complete and exact. The date of departure from and arrival at the appointment destination or other place where official appointment travel begins and ends must be shown. These locations should be listed as City, State and ZIP Code. When driving over 400 miles all overnight/interim stops must be listed. Deviations from official appointment travel must be shown (e.g. personal time). Use the appropriate symbols from page 2 of the DD1351-2 for blocks 15c and 15d. The number of miles traveled by privately owned conveyance (POC) to and from the appointment points, or to and from home to airport and return may be shown in 15f. Do not list names or Home of Record (HOR)/home in the itinerary. Always write the name of the city, state and include the ZIP code.
- 16 Select owner/operator or passenger when travel is performed in a privately owned conveyance.
- 17 Select the appropriate box for duration of travel. This is required for ADSM/DoD civilian employee NMA claims.
- 18 Reimbursable Expenses: Show all itemized expenses in this area to include: transportation (e.g. commercial airfare, train tickets, mileage), mileage within the vicinity of the appointment point (in/around mileage for trips with more than one appointment), rental car, fuel for rental car, parking, tolls, taxis, lodging, lodging taxes and fees, baggage fees, meals, etc. You do not need to break down these expenses by date as that will be validated by the expense receipts.
- **19** LEAVE BLANK
- 20a,b Traveler date and signature are required.

LEAVE ALL SHADED BOXES BLANK

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CRDT Example

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CRDT Example

STATEMENT OF ACTUAL EXPENSES REIMBURSABLE EXPENSES (JTR, par. C4601 and JFTR, par. U4205) LOCAL TRANSPOR-TATION DATE LODGING OTHER (Note 2) **PRESSING** (Note 1) (Note 4) 2021 CLEANING BREAKFAST LUNCH DINNER (Note 3) 0826 20.50 8.25 11.75 0827 10.50 16.50 **NOTES** (a) Fees and tips to hotel employees; (1) Attach lodging receipt(s) as supporting document(s). (b) Fees and tips to porters and baggage carriers (Members of Uniformed Services indicate only those fees and tips paid to porters and baggage (2) Cost of each meal and tip (less the cost of alcoholic beverages). carriers at places of lodging. Fees and tips at common carrier terminals are separately reimbursable.); (3) Cost of local transportation and tips for travel between places of (c) Communications charges for lodging reservations; (d) Expenses (other than those shown on lodging receipts) related to lodging or duty points and places where meals are taken not otherwise reimbursable (JTR, par. C2402, and JFTR, (e) Expenses for personal laundry and cleaning of clothing. par.U3510). (See JFTR and JTR Appendix A, under definition of per diem, for listing of other incidental expenses.) I, John Smith , certify that itemized amounts are actual and necessary expenses (Type or Print Name) incurred by me in performance of official travel for which I have not been reimbursed. SIGNATURE DATE