



Wyoming Guardian *ad Litem* Program

A DIVISION OF THE OFFICE OF THE STATE PUBLIC DEFENDER

PH. (307) 777-7480 FAX (307) 777-5331 WEBSITE: GAL.WYO.GOV

316 W 22ND ST. ROGERS BUILDING CHEYENNE, WY 82002

Travel Invoice

Travel Invoice for GAL Program Contractors and Non-Employee Affiliates

Instructions to Claimant: In accordance with GAL Program policy on travel, this invoice must be submitted within 30 days from completed travel. You must submit this form and all supporting documents by mail only. Once this travel invoice is received, Denise will complete the WOLFS 104 form based on this information. Payment will not be remitted until all supporting documentation is received. All travel is reimbursed at state accepted rates found [here](#). Travel payments are considered taxable income and are reported to the IRS. No payment will be made if prior approval was not granted. Send completed form and supporting documentation to the address listed above Attn: Denise Herman.

Today's Date :

Travel Dates :

Your Name :

Vendor Name :

Hint: Name in which you receive payment through the WOLFS system. If a firm, list firm name.

Destination :

Expense Description	Total
1. Roundtrip Mileage @ .56 cents per mile (from location to location per SAO)	
2. Actual Lodging	
3. Airfare	
4. Taxi/Shuttle	
5. Rental Car/Fuel	
6. Parking/Tolls	
7. Other (requires explanation)	
TOTAL	

GAL Program shall remit all payments to the Contractor via the information currently on file in the Wyoming On-Line Financial System (WOLFS) with the Wyoming State Auditor's Office. Thank You!