



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		@ \$0.23/mile						
Total miles in personal vehicle		@ \$0.42/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**

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)

SDDOT use only

Meal times and rates

Breakfast leave before 5:30 a.m., return after 8 a.m.
Lunch leave before 11:30 a.m.
Dinner leave before 5:30 p.m., return after 8 p.m.

In S.D.	Outside S.D.
\$6.00	\$10.00
\$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.