PUBLIC VOUCHER FOR TRANSPORTATION CHARGES		See FPMR (41 CFR) 101-41 for Instructions on Completing this Form.	VOUCHER OR SCHEDULE NO.
DEPÄRTMENT OR AGENCY, BUREAU OR SERVICE, 1 U.S.	AND LOCATION SHOW	WN ON SUBVOUCHERS	PAID DATE
		CARRIER'S BILL NUMBER  CARRIER'S SCAC NUMBER  SERVICES FURNISHED (Check one)	
		FREIGHT PASSENGER	
Do NOT bill GBL and GTR charges on the same form  ALPHA PREFIX AND SERIAL NO. OF SUBVOUCHER AMOUNT		For payment of as evidenced by a	of services rendered ittached subvouchers.
		DIFFERENCES	AMOUNT
		AMOUNT VERIFIED—CORRECT	r FOR ▶
TOTAL CLAIMED		(Signature or initials)	

ACCOUNTING CLASSIFICATION