

**IODP - TRAVEL AUTHORIZATION/ADVANCE REQUEST**

Traveler (please print) \_\_\_\_\_ Phone: \_\_\_\_\_

Account No. \_\_\_\_\_ SubCode \_\_\_\_\_

Cost Reference \_\_\_\_\_ AMS Requisition \_\_\_\_\_

Destination/Purpose of Trip \_\_\_\_\_

Dates of IODP business-related travel \_\_\_\_\_

Dates of Non-IODP related travel \_\_\_\_\_

**Concur Notification Completed (Box must be checked before request form will be processed)**

**Mode of Travel:**  auto  train  air \_\_\_ Economy fare \_\_\_ Business class (*Dr.'s Certification required.*)

Depart From \_\_\_\_\_ to \_\_\_\_\_ date/time \_\_\_\_\_

Continue From \_\_\_\_\_ to \_\_\_\_\_ date/time \_\_\_\_\_

Return From \_\_\_\_\_ to \_\_\_\_\_ date/time \_\_\_\_\_

Seat Preference:  aisle  window

**Hotel Reservations:** City \_\_\_\_\_ Hotel \_\_\_\_\_

Arrival Date \_\_\_\_\_ Departure Date \_\_\_\_\_ Total nights \_\_\_\_\_

Rate/night \_\_\_\_\_ Conf. no. \_\_\_\_\_

**Car Rental:** Pick-up location \_\_\_\_\_ Date \_\_\_\_\_

Drop-off location \_\_\_\_\_ Date \_\_\_\_\_

**TRAVEL ADVANCE REQUESTED FOR THE ABOVE TRIP**  Yes  No

*Traveler agrees to comply with the terms of the TAMRF-IODP Travel Policy and to submit the travel expense voucher for this trip within the (10) days after return. Disbursement of advance will not normally be made more than thirty (30) days prior to the date of departure.*

**DATE ADVANCE DUE TO TRAVELER** \_\_\_\_\_ **TOTAL ADVANCE \$** \_\_\_\_\_  
(AMOUNT CALCULATED BY TRAVEL DEPT.)

**Traveler's Signature** \_\_\_\_\_ date \_\_\_\_\_

*(Signature confirms all requested arrangements above)*

**Is this payment made to or on behalf of a U.S. citizen or Legal Permanent Resident?**  Yes  No

**Approved: Department Head/Delegate** \_\_\_\_\_ date \_\_\_\_\_

*(Signature approves all requested arrangements above)*

**FOR IODP TRAVEL OFFICE USE**

Screen 104 Voucher # \_\_\_\_\_ GL# \_\_\_\_\_ Screen 111 Voucher # \_\_\_\_\_