

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 #** _____