

TRAVEL AUTHORIZATION FOR TEMPORARY DUTY

PRIVACY ACT NOTICE - Under 5 USC Chapter 57 and Executive Order 9397, the information requested on this form is needed to facilitate authorization action, to determine payment for or reimbursement of allowable travel expenses, and to record and maintain costs of such reimbursements. Information hereon will be used by Federal agency officers and employees who have a need for such information in the performance of their duties. Information will be transferred to appropriate Federal, State, local and foreign agencies when relevant to civil, criminal, or regulatory investigations, or prosecutions. Providing this information is mandatory, and failure to provide it will result in a delay or suspension of the processing of this form.

ORIGINAL - Obligation Copy (to Finance Official)
 1 = Travel Management Center Copy
 1 = Attach to Travel Voucher
 1 = Issuing Office Copy
 1 = Employee Copy

1. TYPE OF AUTHORIZATION <input type="checkbox"/> Single Trip <input type="checkbox"/> Limited Open <input type="checkbox"/> Invitational <input type="checkbox"/> Confirmatory <input type="checkbox"/> Unlimited Open		2. AUTHORIZATION NO.:	
3A. ORGANIZATION		2A. AMENDMENT NO.:	
4A. TRAVELER(S) NAME		3B. OFFICIAL DUTY STATION (ODS)	
GOVT. CHARGE CARD HOLDER <input type="checkbox"/> YES <input type="checkbox"/> NO		4B. TRAVELER'S RESIDENCE <i>City, State (if other than ODS)</i>	
4C. TITLE	4D. OFFICE TELEPHONE NO.	4E. SOCIAL SECURITY NO.	

You are authorized to perform travel as Indicated below and to be reimbursed for necessary expenses of travel in accordance with the DOT Travel Handbook 1500.6.

5. OFFICIAL ITINERARY AND AUTHORIZED REST STOPS		SUBSISTENCE CODES: P = Per Diem authorized unless otherwise indicated A = Actual Subsistence S = Special rate		5C. AUTHORIZED SUBSISTENCE EXPENSE				
5A. FROM:				<i>Code</i>	<i>Lodging</i>	<i>M & IE</i>	<i>Maximum Rate</i>	<i>No. Days</i>
5B. TO:								
& RETURN TO:								

6. PERIOD OF TRAVEL	6A. BEGIN ON OR ABOUT	6B. END ON OR ABOUT	6C. APPROXIMATE NUMBER OF DAYS
---------------------	-----------------------	---------------------	--------------------------------

7A. PURPOSE AND JUSTIFICATION OF TRAVEL

7B. PURPOSE OF TRAVEL CODES

<input type="checkbox"/> 1 = Site Visit	<input type="checkbox"/> 3 = Training attendance	<input type="checkbox"/> 5 = Conference attendance	<input type="checkbox"/> 7 = Entitlement travel	<input type="checkbox"/> 9 = Emergency travel
<input type="checkbox"/> 2 = Information meeting	<input type="checkbox"/> 4 = Speech or presentation	<input type="checkbox"/> 6 = Relocation	<input type="checkbox"/> 8 = Special mission travel	<input type="checkbox"/> 10 = Other travel

8. MODE(S) OF TRANSPORTATION AUTHORIZED: *(Authorize only those modes necessary to complete the travel).*

Common Carrier	Privately-Owned Conveyance	Other
<input type="checkbox"/> Air	<input type="checkbox"/> Auto-Advantageous to the Government Rate Per Mile _____ Cents	<input type="checkbox"/> Government Vehicle or Aircraft
<input type="checkbox"/> Rail	<input type="checkbox"/> Motorcycle Rate Per Mile _____ Cents	<input type="checkbox"/> Rental Car Compact Size
<input type="checkbox"/> Bus	<input type="checkbox"/> Plane Rate Per Mile _____ Cents	<input type="checkbox"/> Other <i>(Specify)</i>
<input type="checkbox"/> Premium Class <i>(Attach Approval Form)</i>	<input type="checkbox"/> POC-Personal Preference <i>(Constructive Cost Comparison Requested. See FTR 301-4.3)</i> Rate Per Mile _____ Cents	

COMMON CARRIER REFUNDS:
 When a ticket is exchanged for one of lesser value, the carrier should issue a receipt or a ticket refund application and is required to make refund directly to the appropriate Servicing Finance Office.

SERVICING FINANCE OFFICE ADDRESS:

TRAVELER'S POTENTIAL LIABILITY NOTICE:
 Travelers are accountable for all transportation tickets, Government Transportation Requests (GTRs), or other transportation procurement documents received by them in connection with their official travel. If trips are canceled or itineraries changed after tickets (or GTRs) are issued to the traveler, the traveler is liable for the value of the tickets issued until all coupons have been used for official travel purposes or all unused tickets or coupons are properly accounted for on the travel voucher.

9. OTHER EXPENSES AUTHORIZED <input type="checkbox"/> Meeting Registration Fees <input type="checkbox"/> Taxis at TDY Location <input type="checkbox"/> Excess Baggage <i>(see FTR 301-5)</i> <input type="checkbox"/> OTHER <i>(Specify and justify item 13)</i>	10. TRAVEL ADVANCE AUTHORIZATION <input type="checkbox"/> ATM Services \$ _____ <input type="checkbox"/> Travelers Checks \$ _____ <input type="checkbox"/> Treasury/Cash Payment \$ _____	12. ESTIMATED COST: A. Transportation <i>(Billed directly to Government)</i> \$ _____ B. Other Transportation Including POV Mileage \$ _____ Subsistence Expense \$ _____ Rental Car \$ _____ Other Expenses <i>(Item 9)</i> \$ _____ Sub-TOTAL 12B \$ _____ Total <i>(12A. & 12B)</i> \$ _____
	11. ACCOUNTING CLASSIFICATION CODE	

13. SPECIAL PROVISIONS/REMARKS:

Travel voucher must be submitted within three (3) days after completion of travel and travel advance must be refunded at that time.

14. SIGNATURE OF REQUESTING/APPROVING OFFICIAL	TITLE	DATE
15. SIGNATURE OF AUTHORIZING OFFICER	TITLE	DATE