



ADVANCED REQUEST FOR OUT-OF-STATE TRAVEL

Employee's Name: _____

Department: _____ Code: _____

Destination: _____

Dates: _____ to _____

Purpose: _____

Requested Mode of Travel:

- Air
- City Vehicle
- Personal Vehicle

Explain Why Personal Vehicle is Being Used:

Other:

Estimated Costs: Air Fare: \$ _____ Lodging: \$ _____ Meals: \$ _____

Registration Fees: \$ _____ Other: \$ _____

Explain: _____

Authorized: _____ Date: _____
Department Head

Authorized: _____ Date: _____
Mayor

Employee Signature: _____ Date Submitted: _____