



EMPLOYEE TRAVEL AUTHORIZATION FORM

EMPLOYEE NAME		EMPLOYEE ID	
DEPARTMENT		DEPARTURE DATE	
POSITION TITLE		RETURN DATE	
DESTINATION (City, State/Country)			

BUSINESS PURPOSE (CHECK ONE): OPERATIONAL AUDIT; CLIENT SUPPORT; CONFERENCE; TRAINING;
 MEETING; PRE-BID; OTHER;

EXPLANATION of TRAVEL (attach additional information as necessary):

EXPENSES	PAYMENT METHODS	EST. COST
AIRFARE	EMPLOYEE REIMB. CORPORATE CARD THIRD-PARTY	
MILEAGE (PERSONAL VEHICLE)	EMPLOYEE REIMB. CORPORATE CARD THIRD-PARTY	
RENTAL VEHICLE	EMPLOYEE REIMB. CORPORATE CARD THIRD-PARTY	
OTHER TRANSPORTATION	EMPLOYEE REIMB. CORPORATE CARD THIRD- PARTY	

EXPENSES	PAYMENT METHODS	EST. COST
LODGING	EMPLOYEE REIMB. CORPORATE CARD THIRD-PARTY	
MEALS	EMPLOYEE REIMB. CORPORATE CARD THIRD-PARTY	
REGISTRATION FEE	EMPLOYEE REIMB. CORPORATE CARD THIRD-PARTY	
OTHER EXPENSES	EMPLOYEE REIMB. CORPORATE CARD THIRD-PARTY	

EMPLOYEE CERTIFICATION	
By signing below, I certify the requested travel is appropriate and necessary for conducting official Company business, and agree to adhere to the Company's policy mgmt011 " <i>Employee Travel & Expense Policy</i> ".	
SIGNATURE _____	DATE _____

DIRECT REPORT AUTHORIZATION			
APPROVED		DENIED	
PRINTED NAME & TITLE			
SIGNATURE		DATE	

FINANCIAL SERVICES AUTHORIZATION (FINANCIAL SERVICES ONLY)			
APPROVED		DENIED	
APPROVERS EMPLOYEE ID		DATE	