6. ITINERARY COMING TO OFFICIAL DUTY STATION FROM LAST TDY STATION

OTHER _____ $ _____
$

(This column is for use by the Division office only)

DATE	TIME	TERMINAL*	CARRIER	SPEEDOMETER READING	COMMENTS
	L				
	A				
	L				
	A				

7. TRANSPORTATION FROM AIRPORT

Parking Fee at _____ $ _____

	FROM	TO	TO
PRIVATE AUTO. (Speedometer Reading)			
LIMOUSINE			No of Miles _____
TAXICAB			$ _____
OTHER			$ _____
			$ _____

8. LIST ADDITIONAL REIMBURSABLE EXPENSES NOT SHOWN.

_____ $ _____
_____ $ _____
_____ $ _____

9. REMARKS

_____

GRAND TOTAL

The amount claimed for mileage to and from the airport may not exceed the one-way taxicab fare plus tip.
I certify that GSA or NASA transportation was not available and that the type of car rental used was the most economical available for the official requirements of the traveler(s).
I certify that the telephone calls (telegrams, etc.) made herein were necessary in the interest of the government.
I certify that at the time reservation was made the accommodations used were the lowest available.

SUBSISTENCE FURNISHED BY GOVERNMENT AGENCY OR INCLUDED IN REGISTRATION FEE ☐ Yes ☐ No No. of Meals ___ Breakfast @ $ _____
___ Lunch @ $ _____
___ Supper @ $ _____

Number of night's lodging _____ at $ _____ per night.

TRAVELED AS PASSENGER OF	NAME	TG NO.	HIS AUTOMOBILE	GOV'T AUTOMOBILE	RENT. AUTOMOBILE
			☐	☐	☐
			☐	☐	☐
			☐	☐	☐

PASSENGERS OF MINE IN	MY AUTOMOBILE	GOV'T AUTOMOBILE	RENT. AUTOMOBILE	NAME	TG NO.
	☐	☐	☐		
	☐	☐	☐		
	☐	☐	☐		

REQUEST POST APPROVAL FOR: (List any items not covered on travel orders or in excess of maximum allowance and give justification).

_____

*Unscheduled transportation (private or government automobile) give departure and arrival time of actual location.