

Form Type

Travel Request Form

City of Hamilton Travel Authorization Form

Traveling From: 2015-04-08

through

2015-04-09

Date of Departure

Date of Return

Please note, these are the dates that you will be leaving and returning from the trip. These should include the travel days in addition to the class/conference/meeting dates.

Authorization is requested by: Tom Adams

Electric

Employee Name

Department

To attend (Course/Conference/Sponsor): AMP Technical Conference

Located at (City and State):

Columbus, OH

Registration Fee

(Cost of Course/

Conference/Meeting)

Basic Fee:

\$ 150.00

Other/Additional Fee: \$

Business Justification for Travel

Annual AMP Technical Conference, opportunity to increase technical understanding and capabilities and learn new products.

Transportation Expenses

Check the appropriate boxes and record the estimated miles or cost for each mode of transportation to be used. For personal car, only estimated miles are necessary

 City Vehicle

Miles

Estimated Cost

 Personal Car

120

\$ 40.00

 Airplane

N/A

\$

 Rental Car

N/A

\$

Meal/Food Expenses

Check the appropriate box; enter the number of days and the daily per diem amount. Per Diem rate table: [M&IE Per Diem Rates](#)

Cost Per Day

of Days

Estimated Cost

 In-town/Local

\$

 Overnight

\$ 56.00

2

\$ 112.00

Lodging Expenses

Hotel/Motel Name

Cost Per Night

of Nights

Estimated Cost

Crowne Plaza North

\$ 96.00

1

\$ 96.00

Miscellaneous Expenses

Check the appropriate boxes and record the estimated cost for all applicable miscellaneous expenses.

Amount

Amount

 Parking Costs

\$

 Tolls

\$

 Taxi Expenses

\$

 Other

\$

Account Number:

502

930

640

550

Total Estimated Cost: \$ 398.00

Submit for Authorization

Send Via Email

For Department Head Use Only

Approved by

 Approved

Send Approval