

TRAVEL REQUEST FORM

Please Print When Filling Out by Hand

EVENT NAME	START DATE (mm/dd/yyyy)	END DATE (mm/dd/yyyy)	EVENT TYPE	
LOCATION (CITY/STATE)	START TIME	END TIME	<input type="checkbox"/> Meeting <input type="checkbox"/> Training <input type="checkbox"/> Organizing <input type="checkbox"/> Representation <input type="checkbox"/> Conference <input type="checkbox"/> Other/TDY	




PASSENGER INFORMATION (as it appears on your valid US or State Government issued identification)

LAST NAME	FIRST NAME	MIDDLE NAME	
STREET ADDRESS 1 (NO PO BOXES)		STREET ADDRESS LINE 2 (IF APPLICABLE)	
CITY	STATE	ZIP CODE 1	ZIP CODE 2
CELL PHONE	PERSONAL/LIUNA EMAIL	DOB (MM/DD/YYYY)	
WORK PHONE	WORK EMAIL	DoD ID NUMBER (if available)*	
CREDIT CARD TYPE <input type="checkbox"/> NGC PEX <input type="checkbox"/> VISA <input type="checkbox"/> MC <input type="checkbox"/> AMEX <input type="checkbox"/> OTHER	CREDIT CARD NUMBER	EXP DATE	CCV CODE

GUEST INFORMATION (as it appears on their valid US or State Government issued identification)

LAST NAME	FIRST NAME	MIDDLE NAME	
STREET ADDRESS 1 (NO PO BOXES)		STREET ADDRESS LINE 2 (IF APPLICABLE)	
CITY	STATE	ZIP CODE 1	ZIP CODE 2
CELL PHONE	PERSONAL EMAIL	DOB (MM/DD/YYYY)	

TRAVEL PREFERENCES

Distance HOR to Event**	>50 MILES				<50 MILES	
Desired Travel Mode (check your preference)	 AIRLINE <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3		 RENTAL <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3		 POV <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	
Departure/Return Point	Preferred Airport (up to 3): 1. _____ 2. _____ 3. _____		Preferred Pick-up Location (up to 3): 1. _____ 2. _____ 3. _____		Preferred Departure Location: <input type="checkbox"/> HOR <input type="checkbox"/> Other (specify) _____	
Requested Travel Dates (mm/dd/yyyy)	Departure	Return	Pick-Up	Drop-off	Departure	Return
Other	Seating <input type="checkbox"/> Aisle <input type="checkbox"/> Window		Body Style <input type="checkbox"/> Sedan <input type="checkbox"/> SUV		**Specific BM approval is required for: 1. Lodging for events <50 away 2. POV for events >50 miles away (the amount reimbursed will not exceed the cost of the most economical mode of transportation).	
Lodging Requested <input type="checkbox"/> YES <input type="checkbox"/> NO	Check-In	Check-Out	Check-In	Check-Out		

NOTES / COMMENTS:

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ACKNOWLEDGMENT AND SIGNATURE

INITIALS	This is a voluntary request to expend funds in order to facilitate my attendance at the event indicated above. I understand that I am required to observe the travel guidelines set forth in the LIUNA NGC Operations Manual. Should I not be able to attend this event I must provide LIUNA NGC with as much advanced notice as possible. My failure to provide timely notice may result in the LIUNA NGC seeking reimbursement for all or some of the expenses incurred (i.e., transportation, lodging, per diem, etc.) as a result of this travel request. Should the LIUNA NGC determine that my notice was not timely and they seek reimbursement for my failure to observe the terms stated above then I shall agree to repay all costs which the LIUNA NGC reasonably believes are my responsibility.
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SIGNATURE	DATE
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