



Revised 05/30/08

Tallahassee, Florida 32306-4330
Department of Statistics and
Statistical Consulting Center
(850) 644-3218

Approval Date: _____

REQUEST FOR TRAVEL PAPERS

Name: _____

From Which Budget(s) Will Your Travel be Paid? _____

Signature and Date: _____

Traveling From: _____ Traveling To: _____

Date & Time Leaving Tallahassee: _____

Date & Time Returning to Tallahassee: _____

Purpose of Trip: _____

How Will your Classes be Covered While You are Gone? _____

Benefit to the State: _____

Others Going with You: _____

Include Your Estimates Below For the Items You Wish to be Reimbursed:

Do You Want to Be Reimbursed For Meals? Yes Or No

Meals will only be paid at rate of \$6 for breakfast, \$11 for lunch and \$19 for dinner.

If a registration fee is paid and includes a meal, we cannot reimburse you for the meal.

Hotel/Lodging: _____

Airfare (List/Name Airline): _____

Avis Car Rental: _____ (Must use Avis – must be Economy “B”
class car unless group travel). Call AVIS - **1-800-338-8211**, Or go to: Avis.com. USE AVIS
State of Florida AWD NO. - **A113400**.

Mileage (Car): miles @ \$0.445/ Mile: \$ _____

Incidental Expenses (Such as Registration, Parking, Tolls, Taxi's): _____

If you want to be reimbursed for a registration fee, you will need to provide a copy of the
program/agenda.

Name of Hotel & Phone Number for Emergencies: _____

For meal
reimburse-
ment, travel
must begin
before 6
AM and
extend past
8 AM for
breakfast.
Must be
before 12
PM and go
past 2 PM
for lunch.
Must be
before 6
PM and go
past 8 PM
for dinner.