

**INSTRUCTIONS:** Submit original and one copy to the Office of the Assistant Secretary for Administration, Main Commerce, Room 5830 HCHB, at least **15 DAYS** prior to the beginning of the trip. Request shall include specific justification for **EACH** leg of the trip for which EXTRA FARE accommodations are requested. Policy and guidelines for use of extra fare accommodations are contained in DOC Travel Handbook 1-3.3d. A copy of the CD-29, Travel Order, must be attached.

## REQUEST FOR APPROVAL OF EXTRA FARE AIR ACCOMMODATIONS

1. NAME OF TRAVELER	2. TITLE AND GRADE	3. DATE OF REQUEST	
4. BUREAU NAME/ORGANIZATIONAL UNIT	5. OFFICIAL DUTY STATION	6. OFFICE PHONE NUMBER	
7. TRAVEL ORDER NUMBER	8. PERIOD OF TRAVEL <div style="text-align: center;">—————▶</div>	BEGINNING DATE	
ENDING DATE			

9. (a) ITINERARY (as shown on the CD-29 Travel Order)

  
  
  

(b) PORTION OF TRAVEL FOR WHICH APPROVAL OF EXTRA FARE IS BEING REQUESTED

10. SPECIFIC JUSTIFICATION FOR USE OF EXTRA FARE AIR ACCOMMODATIONS MUST BE INCLUDED FOR EACH LEG OF THE TRIP  
(Must comply with the Federal Travel Regulation referenced at 301-10.123 or 301-10.124 )

  
  
  
  
  
  
  
  
  
  

11. NAME OF AIRLINE(S) AND FLIGHT NUMBER(S)	12. COSTS—Specify <input type="checkbox"/> ONE WAY <b>OR</b> <input type="checkbox"/> ROUND TRIP
	<ul style="list-style-type: none"> <li>• Cost of Extra Fare \$ _____</li> <li><input type="checkbox"/> Business/Clipper</li> <li><input type="checkbox"/> First Class</li> <li>• Cost of Coach Fare \$ _____</li> <li>• Additional Cost: \$ _____</li> </ul>

13. PRINT NAME (Required), SIGNATURE AND TITLE OF FIRST LINE OFFICIAL RECOMMENDING APPROVAL/DATE

_____	_____	_____
Print Name	Signature and Title	Date

14. (a) Assistant Secretary for Administration or Designee	SIGNATURE OF AUTHORIZING OFFICIAL
APPROVED AS REQUESTED	
APPROVED AS MODIFIED BELOW	
DISAPPROVED	
PRINT NAME (Required)	Date
	SIGNATURE OF AUTHORIZING OFFICIAL Assistant Secretary for Administration or designee

14. (b) MODIFICATION(S) (if applicable)