

REQUEST FOR APPROVAL OF OTHER THAN COACH-CLASS ACCOMMODATIONS

1. Name of Traveler	2. Title	3. Date of Request
4. Bureau Name/Organizational Unit	5. Present Official Station	6. Office Phone Number
7. Travel Order Number	8. Period of Travel _____ →	Beginning Date Ending Date
9. Mode of Travel ____ Air ____ Ship ____ Train	10. Travel Purpose Code	11. Travel Exception Code

12. Itinerary (as shown on the CD-29, Travel Order)

13. Specific Justification for use of other than coach-class accommodations must be included for each leg of the trip.
(Must comply with the Federal Travel Regulation referenced at 301-10.123-125, 301-10.162, or 301-10.183)

14. Name of Carrier(s) and Flight/Train/Ship Number(s)	15. Costs—Specify ____ One Way or ____ Round Trip
	Costs of Extra Fare \$ _____
	____ Business
	____ First Class
	Cost of Coach Fare \$ _____
	Additional Cost \$ _____

16. Indicate where Other Than Coach-Class Accommodations Travel Segments begin, end, and cost (enter all segments). Provide the difference between other than coach-class fare and coach fare.

Origin	Destination	Other than Coach Fare	Coach Fare	Difference in Fares
(1)				
(2)				
(3)				
(4)				
(5)				
Totals →				

17. Printed Name, Signature, and Title of Requesting/Approving Official

Printed Name	Signature and Title	Date

18(a). Assistant Secretary for Administration or Designee	Signature of Authorizing Official
<input type="checkbox"/> Approved as Requested <input type="checkbox"/> Approved as Modified Below <input type="checkbox"/> Disapproved	_____ Printed Name (Required) Date Signature of Authorizing Official Assistant Secretary for Administration or Designee

18(b). Modification(s) (if applicable)