

TRAVEL REQUEST (Review Travel Regulations)

copy for DOT summary 3/27/18

Name Tishaura O. Jones Title Treasurer Date: 3-13-2018

Dept./Section Parking Office Telephone: 314.622.3434

Destination: City District of Columbia Dept. No. 343

Purpose: Business - The Aspen Institute's Expanding Prosperity Impact Collaborative State Washington, D.C.

The Aspen Institute will cover: Lodging for 1 night; Food during travel; Ground transportation and Round-trip Airfare

Convention/Meeting: Commencement Time 1:00 AM PM Day/Date Tue. March 20, 2018
 (Enclose a copy of Convention/Seminar/Meeting announcement with request.) Adjournment Time 2:00 AM PM Day/Date Tue. March 20, 2018

PROPOSED ITINERARY

Departure Time:	8:00	<input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Day/Date	Mon. March 19, 2018
Arrival Time:	10:50	<input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Day/Date	Mon. March 19, 2018
Departure Time:	6:55	<input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Day/Date	Tue. March 20, 2018
Arrival Time:	8:15	<input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Day/Date	Tue. March 20, 2018

Method of Travel: Air Rail Bus Private Auto City Car

Indicate One-Way/Mileage If Traveling By Auto _____

ESTIMATE OF TRIP EXPENSES

Air Coach Fare \$	686.96	Limousine \$	
Hotel @ <u>1</u> /Night \$	331.77	Others \$	
*Registration \$		Total \$	1,018.73
*Food \$			

*Indicate below meals covered by Registration Fees:

Breakfasts _____ Lunches _____ Dinners _____
 Airline Tickets Required (Prepaid Fare) Yes _____ No _____

Advance payment approved: \$ _____

APPROVED: _____ (Division Head) _____ (Date)

APPROVED: _____ (Federal Grants) _____ (Date)

APPROVED: Tishaura O. Jones (Department Director) 3-13-2018 (Date)

APPROVED: _____ (Comptroller) _____ (Date)