SAVE CLEAR PRINT

TASFAA
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TASFAA Event Travel Worksheet

Pursuant to Transportation Policy (6.4.1.2) - Must be completed 45 days prior to travel

Traveler Information:

Name: _____ Email: _____

Committee: _____ Phone: _____

Purpose of Travel:

Destination: _____ Dates: From _____ To _____

Distance (round trip): _____

Cost Comparison *(Attach documentation)*:

Note: *Reimbursement for transportation that is not the most economical means requires prior written approval from the TASFAA President.*

Estimated Airfare and Related Costs:

- Coach/Economy Airfare: _____
- Checked Bag Fee (1): _____
- Mileage (to/from airport) @ .76/mile: _____
- Airport Parking: _____
- Ground Transportation: _____

Total Estimated Air Travel Cost: $ 0.00

Estimated Rental Vehicle Cost:

- Base Rental Rate (Compact/Mid-Size): _____
- Collision Damage Waiver (CDW) and Liability Insurance: _____
- Fuel Cost: _____
- Tolls and Parking Fees: _____

Total Estimated Rental Vehicle Cost: $ 0.00

Estimated Personal Vehicle Cost:

- Mileage (Round Trip) @ .76/mile: $ 0.00
- Tolls and Parking Fees: _____

Total Estimated Personal Vehicle Cost: $ 0.00