

This is a brief overview of the features of a Travel Authorization and Transportation Request. Use this form to request travel arrangements.

Complete form and e-mail as an attachment to your supervisor for approval. The supervisor will approve and FORWARD the e-mail to the [Travel](#) global address; or if additional approvals are required, to the Division Director, Deputy Executive Director and Executive

Click on "tabs" (Instructions, F-70, Contract Exceptions) at the bottom of this file to move from sheet to sheet.

PRINT (This is to ensure the voucher prints on one page--different for MACs and PCs)

Please go to File (on the menu bar), Page Setup, Select "Page" tab, select "Fit to" 1 page.

Only complete the yellow or light turquoise highlighted blanks.

Most of the blanks have hints for information requested.

Field	Description
Name	Payroll name
Headquarters	City where you are stationed.
Dates of Trip	Travel Dates (e.g. 07/02-05/05)
Phone No.	Your 10 digit telephone number
Fax No.	Your 10 digit fax number
Destination	City or cities you are traveling to
Dept./Speedchart	Use the Department that will be charged for the travel expenses and speedchart if applicable.
Grant/Strategy/Function	Consult your Division Budget Analyst for the correct codes.
Traveler's e-mail address	Your e-mail address
Contact Person & Phone #	Person we can contact if a question arises.
Purpose of Trip	Include a detailed description of duties to be performed.
If more than one employee is making this trip, include justification	Include justification and names of travelers.
Will State Contract Vendors/Rate be used?	Check Yes or No. If No, list contract exception. (See Contract Exceptions Tab.
Air Transport	Check all boxes that apply.
Ground Transport	Check all boxes that apply. Indicate preferred rental car company and size of car. Pickup location and pickup and drop off times are required when airline reservations are not requested.
Outbound	Enter only if requesting Air Transportation.
Airport	Departure location
to Airport	Arrival location
Date	Date of departure
Carrier	Name of Airline
Time	Departure time. Indicate AM or PM
Homebound	Use the same instructions as above.
Lodging Reservations	Complete only if you want Travel Unit to make your reservation.
Expense Estimate	Estimate amounts that will be incurred. Contract fares and rental car rates are located on the Comptroller website: http://www.window.state.tx.us/procurement/prog/stmp/
Signatures/Approval:	Approver must have signature authority for travel authorizations.
Supervisor	Approve and submit to Travel global e-mail address; or, e-mail form to the Division Director if approval is required.
Division Director	Required if expense estimate is over \$1,000.00, or for out-of-state travel; approve and submit to Travel global email address, or to Deputy Executive Director if approval is required.
Dep. Executive Director	Required for out-of-state travel.
Executive Director / Commissioner	Required for all out-of-state or foreign travel according to policy adopted by the Commission on May 31, 2005; approve and submit to the Travel global email address.
Executive Director & Commissioner Use Only	Required to claim actual expense for meals and lodging. Approve and submit to Travel e-mail address.

Please make sure all entries are complete and accurate before submitting. Be sure to indicate a contact person and phone number we can use if questions arise.

Contact the Travel Unit at (512) 463-2447 or email travel@twc.state.tx.us if you have questions, problems or suggestions.

TEXAS WORKFORCE COMMISSION TRAVEL AUTHORIZATION AND TRANSPORTATION REQUEST

Name		Headquarters	
Dates of Trip	Phone No.	Dept./Speedchart	
Destination	Grant / Strategy / Function		
Traveler's email address	Contact Person & Phone #		

Purpose of Trip:

If more than one employee is making this trip, include justification and employee name(s):

Will State Contract Vendors/Rates Be Used? YES NO (list exception no.)

<input type="checkbox"/> AIR TRANSPORT	<input type="checkbox"/> GROUND TRANSPORT
<input type="checkbox"/> DIRECT BILL <input type="checkbox"/> PAID BY TRAVELER	<input type="checkbox"/> DIRECT BILL <input type="checkbox"/> PAID BY TRAVELER
<input type="checkbox"/> WINDOW <input type="checkbox"/> AISLE	Rent car agency: _____
	Size Required: _____
	Pickup Location/Time: _____

OUTBOUND

Airport _____ to Airport _____ Departure _____

Date: _____ Carrier: _____ Time: _____ AM PM

Insert additional lines as needed:

HOMEBOUND

Airport _____ to Airport _____ Departure _____

Date: _____ Carrier: _____ Time: _____ AM PM

LODGING RESERVATIONS: (Complete only if you want Travel Unit to make your reservations.) SMOKING NON-SMOKING

Hotel Name & Address:

1st Choice: _____	2nd Choice: _____
Check In Date: _____	Check Out Date: _____
Credit Card # _____	Card Exp. Date: _____

Expense Estimate (Required) Contract rates are found on the TPASS website: <http://www.window.state.tx.us/procurement/prog/stmp/>
Out of state per diem rates are found on the Comptroller website: http://www.window.state.tx.us/fm/travel/out_of_state/rate_sched.html

<input type="checkbox"/> IN STATE	<input type="checkbox"/> OUT OF STATE
Airfare _____	Meals _____
Car Rental _____	Lodging _____
Taxi _____	Parking _____
Mileage _____	Other _____
Total Travel Expenses _____ \$0	
(If over \$1,000.00, Division Director must approve.)	

APPROVALS	ACTUAL EXPENSE
Approved <input type="checkbox"/>	<p>"Executive Director & Commissioner Use Only"</p> <p>I authorize the TWC employee indicated above to receive actual expenses for meals and lodging, in accordance with Texas Government Code Annotated § 660.208.</p> <hr/> <p>Executive Director/Commissioner Date</p> <p>Please indicate one choice</p> <p><input type="checkbox"/> Representing Executive Director or Commissioner</p> <p><input type="checkbox"/> Accompanying Executive Director or Commissioner</p>
Supervisor _____ Date _____ <input type="checkbox"/>	
Division Director _____ Date _____ <input type="checkbox"/>	
Deputy Executive Director _____ Date _____ <input type="checkbox"/>	
*Executive Director/Commissioner _____ Date _____ <input type="checkbox"/>	

* Required for all out-of-state or foreign travel according to policy adopted by the Commission on May 31, 2005.

Texas Workforce Commission

REQUEST TO INCREASE MAXIMUM OUT-OF-STATE LODGING RATE

A higher lodging rate may be requested only for **out-of-state travel**. TWC Travel Guide, p. 24, Out of state lodging and meals. General Appropriations Act, 80th Legislature, Regular Session, Article IX, Section 5.06(c).

Please provide all of the following information.

Dates of lodging (<i>Check-in date</i>)		<i>(Check-out date)</i>	
Name(s) of traveler(s)			
Name of lodging establishment		Rate requested	Maximum Federal lodging rate for the duty point
City (<i>Duty point</i>)	County	State	
Check reason for request			
<input type="checkbox"/> Designation would result in a decreased total cost of travel to the state (document the potential cost savings); or <input type="checkbox"/> Agency has confirmed with a travel agent that no safe lodging is available for less than or equal to the maximum lodging reimbursement rate for the duty point.			
Travel agent & agency name _____		Phone _____	
The TPASS contracts must be used unless an approved exception condition exists. These exceptions are found on the TPASS website and on the Travel Authorization form F-70. Is there a contracted hotel in the duty point to which you are traveling? No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, note exception here. _____			
Each agency is responsible for retaining documentation to support the reasoning for a higher lodging request. The Comptroller may request any details of this documentation, regardless of the reason for the higher lodging request.			

CALCULATION TABLE

Requested rate	\$				Costs not to be incurred:			
Less allowed comparison rate *	-				Motor vehicle rental cost per day **	\$		
Equals	=				Number of days not needed	x		
Number of nights	x				Equals	=		
Equals	=				Plus: other expenses not incurred	+		
Number of employees	x				Costs not to be incurred	=		
Equals	=							
					→			
					Total cost savings	\$		

***Allowed comparison rate**--If the duty point has one or more TPASS contracted hotels, then the allowable rate is the highest available contracted rate, not to exceed the maximum lodging reimbursement rate for the duty point. If the duty point does not have a TPASS contracted hotel, then the allowable rate is the maximum lodging reimbursement rate.

**** Allowed motor vehicle rental cost** --If the duty point has one or more TPASS contracted rental vehicle companies, then the allowable cost is the lowest available contracted rate for an appropriate motor vehicle at the duty point. If the duty point does not have a TPASS contracted motor vehicle rental company, then the allowable cost is the lowest available rental rate for an appropriate motor vehicle at the duty point.

Please indicate a full explanation of the above calculation and a complete itemization of "Other expenses not incurred":

Signature of Traveler 1	Signature of Traveler 2
Signature of Traveler 3	Signature of Traveler 4

Executive Director Approval	Date

Texas Administrative Code

TITLE 34 PUBLIC FINANCE
PART 1 COMPTROLLER OF PUBLIC ACCOUNTS
CHAPTER 20 TEXAS PROCUREMENT AND SUPPORT SERVICES
SUBCHAPTER F STATE SUPPORT SERVICES--TRAVEL AND VEHICLES
RULE §20.303 **Exceptions to the Use of Contract Travel Services**

(a) This section provides exceptions to use of contract travel services. These exceptions apply to the use of any contract travel services. When travel services are obtained at a lower total cost than the cost of contract travel services, no reporting of exceptions is required. Exceptions must be documented only when the total cost is greater than contract travel services rates. Nothing in this section affects or alters the authority of the comptroller regarding travel reimbursement or audit agreements.

(b) **Lower Cost to the State.** State agencies may use any travel services obtained at a price lower than the contract travel services price. State agencies are encouraged to obtain lower priced travel services through the use of fourteen day or other advanced reservations programs, promotional price reductions, or any method that provides a lower overall cost of travel.

(c) **Unavailability of Contract Travel Services.** The contract travel services are not available during the time or at the location necessary for the business purpose; or the contract travel service does not provide for the service required; or because the contractor is unable to provide the contract services due to a force majeure event.

(d) **Special Needs.** The traveler's health, safety, physical condition or disability requires accommodations, including medical emergency or other necessary services, not available from contract travel service contractors.

(e) **Custodians of Persons.** The traveler has custody of a person pursuant to statute or court order and the traveler is required to provide a degree of security and safety that is not available from contract travel service contractors.

(f) **In Travel Status.** The traveler is in the course of travel and changes in scheduling render the use of contract travel services impractical or the appropriate travel services are not available. The traveler shall make reasonable efforts to secure rates equal to or lower than the contract travel service rates.

(g) **Group Program.** The traveler is using a group program wherein reservations were made through a required source to obtain a particular rate or service.

(h) **Emergency Response.** The traveler is responding to a public health or safety emergency situation.

(i) **Legally Required Attendance.** The traveler is required by a court, administrative tribunal or other entity to appear at a particular time and place without sufficient notice to obtain contract travel services.

Source Note: The provisions of this §20.303 adopted to be effective December 8, 2005, 30 TexReg 8051; transferred effective September 1, 2007, as published in the Texas Register July 6, 2007, TexReg 4237