

PR0045027
POW13221

CITY OF RAPID CITY TRAVEL REQUEST

Person requesting travel William Reishus Department Airport/ARFF

I hereby request permission to travel for the following purpose: (Give specific nature of business and interest of the City to justify cost involved.)

LARGE FRAME COMMERCIAL AIRCRAFT CLASS -

List all other City employees, if any, making the trip for the same purpose: NONE.

Place of meeting or destination: Dallas Fort Worth Airport Training Center.

Date of meeting December 8-11, 2008

Date trip to begin December 7, 2008 Date trip will end December 12, 2008

Method of transportation requested Air, rental car.

Estimated transportation cost	AIR \$	<u>376.00</u>
Meals *	RENTAL CAR	<u>300.00</u>
Lodging <u>5</u> days		<u>300.00</u>
Other costs - description <u>Tuition - \$300.00</u>		<u>300.00</u>
	*	<u>216.00</u>
		<u>\$ 649.00</u>

Total estimated cost of trip

Signed William Reishus 12-7-08 Date CA R Date 8 OCT 08
(person requesting travel) (Department Head)

When the cost of the trip will exceed \$500, per employee, this section must be signed.

In accordance with the provisions of Rapid City ordinances and travel regulations, consent is hereby given for travel as requested in the foregoing application. Maximum cost of trip authorized is \$ MA

CITY OF RAPID CITY TRAVEL REQUEST

Person requesting travel William Reishus Department Airport/AREF

I hereby request permission to travel for the following purpose: (Give specific nature of business and interest of the City to justify cost involved.)

Large Frame Commercial Aircraft Class

List all other City employees, if any, making the trip for the same purpose: none

Place of meeting or destination: Dallas Fort Worth Airport Training Center

Date of meeting December 8-11 2008

Date trip to begin Dec 7 2008 Date trip will end Dec 12 2008

Method of transportation requested Air, Rental Car *Billed Together

Estimated transportation cost \$ 399.38*

Meals 144.00

Lodging 5 days 399.38*

Other costs - description Tuition 350.00

Rental Car 241.29

Total estimated cost of trip \$ 1534.05

Signed _____ Date _____ Date _____

(person requesting travel)

(Department Head)

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