

## OVERNIGHT/OUT-OF-STATE TRAVEL REQUEST

Valid for overnight and/or out-of-state travel  
Revised 1-08-2019

REQUEST DATE:	7/7/2023		
NAME:	TITLE: Housing & Community		
DEPARTMENT: CDC	ACCOUNT CODE:	5000-1440	
PURPOSE OF TRIP: (explain fully the necessity of making the trip)			
Community Development Manager to attend the National Association for County Community & Economic Development (NACCED) Annual Educational Conference and Training. 100% Community Development Block Grant funded.			
DESTINATION: Salt Lake City, UT			
DATE OF DEPARTURE:	9/18/2023	DATE OF RETURN ARRIVAL:	9/21/2023
(Please include a detailed explanation if different from official business dates)			
<b>Please indicate the estimated amount for each applicable expense.</b>			
REGISTRATION:			\$605.00
TRANSPORTATION:			\$700.00
LODGING			\$630.00
MISCELLANEOUS EXPENSES (parking, mileage, etc.)			\$175.00
RENTAL CAR: (explain fully the necessity)			\$0.00
REFERENCE MATERIALS:			\$0.00
MEALS: (Per Diems)			\$224.00
TOTAL			\$2,334.00

### REVIEWED BY AND DATE APPROVED:

Signature on File

Department Head: \_\_\_\_\_  
(Signature)

Date: 7/10/23

Committee Name: \_\_\_\_\_  
ALL OVERNIGHT TRAVEL

Date: \_\_\_\_\_

County Board: \_\_\_\_\_  
ONLY OUT-OF-STATE TRAVEL

Date: \_\_\_\_\_

Please note: If actual costs exceed the estimates, this form must be re-submitted for approval.