Supreme Court of Nevada Preauthorization for Non Employee Travel

To be submitted prior to travel for approval and secure funding

Name:			Traveler Title	
Court:		(OO NOT PRINT - FILL AND "SIGN" U	SING
Email:			FIELDS ON FORM (s-signature /s/Ty	pe Name)
Destination:				
Travel Dates:	From:	То:		
EVENT NAME	& JUSTIFICATION (E)	vent details to support travel requ	uest)	
**This is only ar	n initial estimate of trave	el expenses for the dates and	N 30 DAYS AFTER LAST DAY OF TF event listed above for the purposes of budget re the Nevada Supreme Court Travel Policy and the	view and
			nitted via email to AOCaccounting@nvcourts.nv	
1. Registration	/Tuition/Conference I	Fee total (requires a receipt and a	certificate of attendance to be reimbursed):	7751
2. TRAVEL RE	LATED COSTS	Link to GSA website for rate	<u>es</u>	
Incidentals (\$8	5.00 per day, no receipt requ	uired)	# of days	
Enter # of day	•		rate from drop down (all GSA rates may not b	e available)
Breakfast:	# of days	GSA Rate:		
Lunch:	# of days	GSA Rate:	Most Total	
Dinner:	# of days	GSA Rate:	Meal Total:	
Lodging (Requi	ires receipt to be reimbursed	GSA rate + taxes & fe	es: # of Nights:	
Ground Trans	sportation (Car rental, shut	ttle, taxi, ride share, etc. Requires a i	eceipt to be reimbursed):	
Mileage enter # miles (calculated at the State rate):			# of Miles:	
Parking (Requires a receipt to be reimbursed):			# of Days:	
Airfare (refer to	travel policy for reimbursabl	le fares):		
Other travel d	escription & cost:			
			Total Travel Costs:	7750 InState 7760 OutState
Only use if the	re is a cap on travel c	osts, including registration	3. TOTAL ALL COSTS:	
(AOC USE ONLY GSA and AOC tra) MAXIMUM REIMBURS vel policy rules still apply eimbursement amount	EMENT	TOTAL EST AFTER ADJUSTMENTS: (AOC USE ONLY)	
			PATE THEN EMAIL WITHOUT EGRITY OF THE FORM	
Traveler S-Signat	aveler S-Signature AOC/JUD ED S-Signature:			

Date

Date

Expenditure coding: