Supreme Court of Nevada Preauthorization for Travel (Judges Use Only Submit prior to travel)

				Submit prior to travel)	
Name: Ti				e (select from drop down):	
Court:				Email:	
Event Sponso	or:			Event Dates: From:	To:
Destination:				Travel Dates: From:	To:
Name of Eve (Attach event b	ent: rochure or agenda, if a	applicable)			
JUSTIFICATI	ON: (Explain how	v this travel or atte	ndance at this	s event will benefit you and/or you	ur court)
CLE	C	CJE C	EU	REQUIRED COURSE	
ELE	CTIVE COURSE*		BOA	ARD/COMM MEMBER*	
*ELECTIVE COU	RSES & BOARD/COM	M MEMBER EXPENSE	S CANNOT EXCE	ED A COMBINED \$2,500 IN THE STATE FI	
					Claim Adj Amt (AOC use)
			Regist	ration/Tuition/Conference Fee total	7300
TRAVEL REL	ATED COSTS	Link to GSA we	bsite for rates	-	6001
Incidentals (\$5.00 per day, no receipt required)			# of days		
-				rate from drop down (all GSA rates	may not be available)
Breakfast: Lunch:	# of days # of days		A Rate: A Rate:		
Dinner:	# of days		A Rate:	Total Meals	6X00
Lodging (Requires receipt to be reimbursed) GSA rate + taxes & fees:			# of Nights:	6X05	
Ground Trans	portation (Car rental,	shuttle, taxi, ride share,	etc. Requires a re	eceipt to be reimbursed):	6X30
Mileage enter # miles (calculated at the State rate):				# of Miles:	6X40
Parking (Requires a receipt to be reimbursed):			# of Days:	6X41	
Airfare (refer to	travel policy for reimbu	rsable fares):			6X50
Other travel de	escription & cost:				
nly use if there is a cap on travel costs, including registration			TOTAL ALL COSTS:		
nly use if there is a cap on travel costs, including registration OC USE ONLY) MAXIMUM REIMBURSEMENT SA and AOC travel policy rules still apply in termining final reimbursement amount			TOTAL EST AFTER ADJUSTMENTS USE IF NEEDED: (AOC USE ONLY)		

approval. The final travel claim reimbursement will be paid subject to the Court's Travel Policy and the documentation provided with the signed travel claim form. Travel claims must be submitted within 30 days after last day of travel**

PLEASE DO NOT PRINT TO MAINTAIN INTEGRITY OF THE FORM- TYPE S-SIGNATURE AND DATE (/s/Type Name)

Judge S-Signature

Date

SUBMIT VIA EMAIL TO: AOCaccounting@nvcourts.nv.gov

AOC notes regarding adjustments: