HIDALGO COUNTY PURCHASING DEPARTMENT
TRAVEL REQUEST FORM
USING THE STATE OF TEXAS TRAVEL CARD

As per County Travel Policy (at least two (2) weeks prior to the date the check will be needed)

Date of Travel Request Submission: _____
Department: _____ Requestor: _____ EXT: _____
Number of Employees: _____
Employee(s) Name (DOB if requesting airfare): _____
_____
Destination: _____
Name of Seminar/Conference: _____
Travel Account Number:_____

HOTEL: Req. #: _____ P.O. #: _____

MUST REQUEST CHECK FOR HOTEL

Hotel Name: _____ Hotel Address: _____

Number of Rooms: _____ Hotel Phone Number: _____

Check In: _____ Check Out: _____

Single Bed or Double Beds

AUTO: Req. #: _____ P.O. #: _____

Rental Location: _____ Type of Vehicle: _____

Date/Time of Pick up: _____ Date/Time of Drop off: _____

AIRFARE: Req. #: _____ P.O. #: CITIBANK vendor #: 343277
Refundable: YES NO Airline Name: _____

Departure Date/Time: _____ Return Date/Time: _____

_____ _____
Signature: Elected Official/Department Head Date
Original Signature is required

For Purchasing Department Office Use Only

Hotel Confirmation: _____Spoke to: _____
Auto Confirmation: _____
Flight Confirmation: _____
Received Confirmation via email/fax: _____
Credit Card Authorization Form Hotel: _____ Faxed back to Hotel: _____
CC Approval on: _____ Agenda Item: _____
HCPD-TRAVEL-2011 REVISED 2012 CC APPROVED ON