

GENERAL SERVICES COMMISSION
TRAVEL AND TRANSPORTATION DIVISION
State And Travel Management Program
State Agency Monthly Report

Date: _____ Month Reported: _____

State Agency Name: _____ Agency No. _____

Person Preparing Report: _____

Phone Number of Person Preparing Report: _____

Source of Information: (check as many as applicable)

Travel Agency Charge Card Travel Voucher

Other (please specify) _____

Data Required:

A. Commercial Airline Trips -

Number Made _____ Total Airline Expenses _____

B. Hotel/Lodging Activity -

Reservations _____ # Room Nights _____ Total Expenses _____

C. Rental Car Activity -

Reservations _____ # Rental Days _____ Total Expenses _____

D. 3-digit Airport Specific City Pair Codes Most Frequently Used - (City pair - one way airline flights in either direction between two cities as measured from the origin city airport code to the destination city airport code regardless of intermediate stopovers or flight connections.)

[Example: AUS (Austin) to IAH (Houston Int'l) 10 segments; IAH (Houston Int'l) to AUS (Austin) 8 segments = 18 segments for airport specific city pair AUS (Austin) to/from IAH(Houston Int'l)]

City Pair (Airport Code)		(Airport Code)	# of Segments
1. _____	to/from	_____	_____
2. _____	to/from	_____	_____
3. _____	to/from	_____	_____
4. _____	to/from	_____	_____
5. _____	to/from	_____	_____
6. _____	to/from	_____	_____
7. _____	to/from	_____	_____
8. _____	to/from	_____	_____
9. _____	to/from	_____	_____
10. _____	to/from	_____	_____

Airline (based on city-pair data submitted in Section D) -

	Airline Name (show airline 2-digit code)	#of Round Trip Tickets Used
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____
7.	_____	_____
8.	_____	_____
9.	_____	_____
10.	_____	_____

Hotel -

	Hotel Name (show complete hotel name)	City, State	Zip Code	# Room Nights
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____
7.	_____	_____	_____	_____
8.	_____	_____	_____	_____
9.	_____	_____	_____	_____
10.	_____	_____	_____	_____
11.	_____	_____	_____	_____
12.	_____	_____	_____	_____
13.	_____	_____	_____	_____
14.	_____	_____	_____	_____
15.	_____	_____	_____	_____

Rental Car -

	Rental Car Company Name (show rental car 2-digit code)	#of Rental Days
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____

Instructions for Completion of this form: This report is due in Austin on the 30th day of the next month after the month being reported. Mail this report to: Travel and Transportation Division, P.O. Box 13047, Austin, TX 78711 3047.