

Travel Form

Please note:

All domestic and trans-Tasman flights must be booked using the **QBT Online Booking Tool**.

For international bookings, please complete the ACT Government Booking form on the

http://sharedservices/ACTGovt/Procurement/Buying/Existing-Contracts/Flight-Bookings.htm

For all other travel related information please see **Buying Goods and Services intranet site**.

Travel Requisition No:

QBT→ 2 1300 797 357

Form to be completed by the traveller and approved by the delegate before any travel or accommodation is booked.

bookeu.									
TRAVELLER'S D	ETAILS								
Name: Robert S	Schmidli		Classifi	Classification: Snr Staff Specialist					
Group: Medicir	ne		Unit: E	Unit: Endocrinology					
Work phone: 6282 9962		Fax: 6282 4117		Mobile: 0413 614 456		Home Phone: 6286 7559			
Home address:			Corpor	Corporate Frequent Flyer Number:					
			accumi	Note: Frequent Flyer points are no longer accumulated. However, a flight will count towards your airline club status progression					
TRAVEL DETAIL	.S								
Reason: ESA Cl	linical and S	cientific m	eetings						c
Departure and	Arrival Det	ails (comple	ete time	es and f	light details	after travel	is approved)		
Depart location	Date	Time		rive ation	Date	Time	Travel class Economy or Business Class	Airline, flight no.	
Canberra	10/11/22	09.10	C/chu	rch	10/11/22	19.55	Econ	NZ 095/104/565	
C/church	20/11/11	10.00	Canbe	erra	20/11/22	17.00	Econ/prem	NZ 850/105/362	
	//				//				
	//				//				
<u> </u>		•		opies o	f your curren	t driver's li	cence and com	prehensive insurance.	C
Make, model ar					- 11				(
(02) 8585 0806				-		nodation b	ookings must l	be made through Lido	
	ı	Domest	ic			International			
Director-General s			Economy Class under 4 hours, 4				Ви	usiness Class	
Executives	4 star	* over	over 4 hours Business Class						

Economy Class

3.5 star*

Version 2.0 Issued: 19/05/2015

3 star*

Non Executives

Economy Class

TRAVELLER'S DETAILS

If you intend to seek approval to vary from accommodation standards, please give reasons:

Assammad	ation datail	le /to ha completed at	torannro	val to travel is given). Include any	private accommodation			
details	ation detail	is (to be completed al	ter appro	val to travel is given). Include any p	private accommodation			
Date in	Date out	Hotel/Motel/Apartme nt	*Accom	Address	Phone			
10/11/22	16/11/22	Break Free on Cashel	3	165 Cashel Street, Christchurch, N	+64 3 360 1064			
16/11/22	20/11/22	Own arrangements						
//	//							
Details of a	ny leave or	non-official travel wl	nich you i	ntend taking directly before or afte	er your official travel			
From: 16/1:	1/22 To	o: 20/11/22	ontact de	tails: +61 413 614 456				
Payment of meals and in	A CONTRACTOR OF THE PARTY OF TH	personal records of the control of the control of	credit card	or reimbursement are the preferred r	methods of payment for			
Actual reaso	nable costs	will be reimbursed upo	n the provi	ision of receipts. All advances must b	e acquitted.	11		
Signature o	f traveller	Roun		Date 30/9/22				
Supported -	funds are	available and travel is	s recomm	ended		15		
Signature o	f supervisor			Date / /				
Approval of	travel	发生的自己的						
Signature of delegate Pos No				Classification	Date / /			
Signature o	f Director-G	eneral/Minister (for c	overseas t	ravel only)	Date / /			
BOOKING I	REFERENCE			Advance and cabcharges acqu	itted (finance officer)	17		
TRAVEL CO					Advance and cabcharges reconciled			

Signature of finance officer

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COST CODES: