**This form is a statement executed by the traveler justifying the cost of choosing an alternate form of transportation (common carrier) versus the lowest cost available coach airfare**

|  |  |  |
| --- | --- | --- |
| **Traveler’s Name** | **ER#** | **Mode of Transportation** |

**Part A – Check attestation**

**It has been determined that the selected common carrier is more economical then the lowest cost airfare or is the only mode of travel available to arrive at the work destination**

**-------------------------------------------------------------------------------------------------------------------------------------------------**

**Part B (If Applicable) – Higher Class Fare for Alternate Common Carrier**

**It has been determined that the higher-class fare is necessary for having business interactions or for conducting state business while I route to the destination**

**-------------------------------------------------------------------------------------------------------------------------------------------------**

**Part C (If Applicable) – Health and Safety**

**It has been determined that the alternate common carrier is necessary due to the health and safety of the traveler**

**Instructions:** Please complete this form and attach it to your Expense Report

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Traveler Signature of Authorizing Officer Date**