

EMPLOYEE PRE-TRAVEL AUTHORIZATION

Date/Time Stamp:

Pre-Travel Filing Instructions: Complete this form in advance of travel. (Submit a copy to the **Senate Ethics Committee** in **220 Hart**.) This form is also required for the post-travel filing.

Name of Traveler: _____

Employing Office/Committee: _____

Private Sponsor(s) (list all): _____

Travel date(s): _____

Destinations(s): _____

Explain why participation in the trip is connected to your official duties: _____

Name of accompanying family member (if any): _____

Relationship to Employee: ☐ Spouse ☐ Child

I certify that the information contained in this form is true, complete and correct to the best of my knowledge:

(Date)

(Signature of Employee)

TO BE COMPLETED BY SUPERVISING MEMBER/OFFICER:

I, _____ hereby authorize _____
(Print Senator's/Officer's Name) (Print Traveler's Name)

an employee under my direct supervision, to accept payment or reimbursement for necessary transportation, lodging, and related expenses for travel to the event described above. I have determined that this travel is in connection with his or her duties as a Senate employee or an officeholder, and will not create the appearance that he or she is using public office for private gain.

I have also determined that the attendance of the employee's spouse or child is appropriate to assist in the representation of the Senate. (signify "yes" by checking box) ☐

(Date)

(Signature of Supervising Senator/Officer)