

CORPORATION 2004

TRAVEL ARRANGEMENTS WORKSHEET

DATE: _____

TRAVELLER INFORMATION

Name	Corporate telephone	Corporate address
	Residential telephone	Residence
Purpose of trip/destination	Travel period (with alternative dates)	
Travel counsellor's name and telephone		Method of payment
Travel funds required		
Cash (specify amount of currency for each country)		\$
		\$
Traveller's cheques (specify denominations)		\$

Local transportation needed

Special requirements during trip

- | | |
|--|---|
| <input type="checkbox"/> food | <input type="checkbox"/> reserved seating in flight |
| <input type="checkbox"/> non-smoking/smoking | <input type="checkbox"/> movies |
| <input type="checkbox"/> passport/visa/birth certificate | <input type="checkbox"/> use of computer/telephone |
| <input type="checkbox"/> international driver's licence | <input type="checkbox"/> car rental |
| <input type="checkbox"/> prescriptions | |
| <input type="checkbox"/> location of accommodation: near airport or downtown | |
| <input type="checkbox"/> other | |

Arrangements prepared by _____