GROUP MOVEMENT INSTALLATION TRANSPORTATION REQUEST

NOTE: THIS IS ONLY A REQUEST. TO HAVE TICKETS ISSUED YOU MUST FURNISH ORDERS
WITH A FUND CITE LISTED WITH NAME AND SSN's OF PASSENGERS.

SUBMIT REQUEST TO ITO, PERSONNEL MOVEMENTS BLDG # 4-2834, Normandy Drive, 1st floor
Ft. Bragg, NC 28310 Phone (910)396-2468 DSN: 236-5802 FAX (910) 396-6715 DSN FAX: 236-6715

DATE:_____ EXERCISE NAME OR PURPOSE:_____

UNIT: _____ POC:_____

PHONE: _____ FAX: _____ EMAIL: _____

MODE OF TRAVEL: COMMERCIAL AIR:_____ BUS:_____ BOTH____ CHARTER AIR_____

GOING:

PASSENGERS:_____ ORIGIN:_____ DESTINATION:_____

DATE OF TRAVEL FROM (ORIGIN): DATE:_____ TIME:_____

REQUIRED ARRIVAL AT (DESTINATION) DATE: _____ TIME:_____

WEAPONS** YES: NO: EXCESS BAGGAGE** YES:____ NO:_____ # PIECES:_____

(FOR COMMERCIAL BUS ONLY):

PICK UP ADDRESS ((**ORIGIN:** _____
(STREET ADDRESS & BLDG. NUMBER)

PICKUP ADDRESS **(DESTINATION)** _____
(STREET ADDRESS & BLDG. NUMBER)

MEAL TICKETS BREAKFAST_____ LUNCH _____ DINNER _____**

BUS REQUIRED TO REMAIN WITH UNIT: YES:_____ NO:_____

RETURN:

PASSENGERS:_____ ORIGIN:_____ DESTINATION:_____

DATE OF TRAVEL FROM (ORIGIN) DATE:_____ TIME:_____

REQUIRED ARRIVAL AT (DESTINATION) DATE:_____ TIME:_____

WEAPONS** YES:_____ NO:_____ EXCESS BAGGAGE** YES:_____ NO:_____ # PIECES:_____

****ANYTHING OVER TWO PIECES OF BAGGAGE PER PERSON IS CONSIDERED EXCESS BAGGAGE: DIMENSIONS (LENGTH-WIDTH-HEIGHT) AND WEIGHT OF EACH PIECE MUST BE LISTED ON THE BACK OF THIS FORM (FOR COMMERCIAL AIR WEAPONS MUST BE CARRIED IN A DOUBLE DOUBLE LOCKED HARD SIDED CONTAINER AND MUST BE CONSIDERED EXCESS BAGGAGE) EACH PIECE OF EXCESS BAGGAGE CANNOT EXCEED 70 LBS.**

*****CANCELLATIONS/NO SHOWS AFTER TICKETING WILL RESULT IN PENALTIES OF 25% TO 100%**

** NO MILITARY AIRCRAFT WILL BE CONSIDERED FOR THIS MOVE: _____
(AUTHORIZED UNIT SIGNATURE)

FUNDING:

ESTIMATED COST OF TRIP:_____ GROUP MVTS COORDINATOR:_____ FB # ____ MRN_____

FUND CITE: _____

FUNDING AUTHORIZATION SIGNATURE: _____

BAGGAGE INFORMATION:

_____DUFFLE BAGS
_____ RUCKSACK WITH FRAME
_____ RUCKSACK WITHOUT FAME
_____(C) BAG
_____ (A) BAG
_____ ALICE PACK
_____ OTHER

MEALS:

B=BREAKFAST- $9.00
L=LUNCH - $9.00
D=DINNER - $18.00
PLUS A $11.04 PROCESS FEE PER MEAL TICKET ISSUED