NAME AND TITLE OF TRAVELER					OFFICE SYMBOL		ROOM NO.	O. TELEPHONE NO.		NO.
REQUESTED BY					OFFICE SYMBOL		ROOM NO.		DATE REQUESTED	
DATE NEEDED		TRAVEL AUTHORITY NO.			RESERVATION AGENT				TICKETING DATE	
DATE	DEPARTURE		ARRIVAL		FLIGHT OR		CARRIER		FARE	MEAL
	FROM	то	то	TIME	DATE	TRAIN NO.	CARRIER		BASIS	SERVICE
SIGNATURE FOR RECEIPT OF TICKETS				DATE	TIME		•	SERVICE	1	
VA FORM NOV 1992(R) 3036a EXISTING STOCK OF VA FORM 70-3036a, JAN 1989, WILL BE USED. TRAVEL RESERVATIONS WORKSHEET										

HOTEL ROOM RESERVATIONS										
ACCOMMODAT	DATE REQUESTED									
DATE IN	DATE OUT	NAME OF HOTEL (Include Street, City, State, and Zip code)	TELEPHONE NO. (Area Code)	CONFIRMATION NO.	GUARANTEED OR DEPOSIT REQUIRED					

REVERSE OF VA FORM 3036a, NOV 1992