

INTEROFFICE MEMO



DATE:

PHONE:

FROM: ALLAN RAWLAND, MSW, ACSW, Director
Department of Behavioral Health

TO: CAO

SUBJECT: JUSTIFICATION FOR OUT-OF-STATE TRAVEL

NAME OF EMPLOYEE(S) TRAVELING:

DATE(S) OF TRAVEL:

DESTINATION:

PURPOSE OF TRAVEL:

TOTAL COST:

ACCOUNTING CODES: AAA- MLH- MLH- 2140- Trainings

COST CENTER #:

JUSTIFICATION: