**State of South Carolina**

**Comptroller General’s Office**

**Approval of Foreign Travel**

Any foreign travel by State personnel must have prior approval of the Comptroller General’s Office. Please complete this form and return to Jennifer Hairston (jhairston@cg.sc.gov) **prior to incurring any expenditures** and at least 14 calendar days **prior** to travel.

Traveler must arrange the **most economical mode of travel** and exercise the same care in incurring lodging, meal, and other allowable expenses that a prudent person would exercise if traveling.

Once travel is complete, please attach **a copy of this approval to any relevant Travel Support Document**.

Traveler’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ZEMP #\_\_\_\_\_\_\_\_\_\_\_\_\_\* Personnel # \_\_\_\_\_\_\_\_\_\_\_\_\*

Traveler’s Agency Number \_\_\_\_\_\_\_\_\_\_\_\*

|  |  |  |
| --- | --- | --- |
|  | **Location** | **Date** |
| **Depart From:** |  |  |
| **To:** |  |  |
|  |  |  |
| **Return From:** |  |  |
| **To:** |  |  |
|  |  |  |

*Please attach an explanation for the purpose of the travel and its planned benefit to the State. Also attach any relevant documentation such as an agenda or itinerary.*

**Requested by:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Traveler’s Printed Name Traveler’s Signature Date

**I approve this travel and certify that it is necessary for the traveler named above to make this trip on official State business:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Agency Head Printed Name Agency Head Signature Date

**CGO approval**:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CGO Printed Name and Title CGO Signature Date