STATE OF FLORIDA	NAME							OFFICIAL HEADQUARTERS						DATE				
AUTHORIZATION TO INCUR TRAVEL EXPENSE	DEPARTMENT							DIVISI	DIVISION									
DESTINATION AND PURPOSE OF TRIP	ESTIMATED COST						TRAVEL PERIOD											
	Travel	Per Diem	Other															
CONFERENCE OF CONVENTIONAL TRAVEL: Explanation of Benefits Accruing to the State of Florida																		
		-																
I HEREBY CERTIFY THAT TRAVEL AS SHOWN ABOVE IS	TO BE INC	URRED IN	CONNECT	FION WI	TH OFF	FICIAL I	BUSINESS OF	THE ST.	ATE.									
EMPLOYEE	APPROVED - SUPERVISOR					DATE			APPROVED - AGENCY HEAD					DATE				
	1																	