

Travel Authorization Request - Exceed Maximum Per Diem Rates

Per NYS Travel Guidelines, lodging costs that exceed the stated per diem rates must be requested in writing and approved by the Fiscal Officer:

Traveler's Name	CUNYfirst EMPL ID
Donoutmont	Data Barwastad
Department	Date Requested
Expected Travel Location	
GSA Per Diem Rate	Requested Rate
Passan(s) for exceeding GSA Lodging Par Diam.	
Reason(s) for exceeding GSA Lodging Per Diem:	
************	***************
Fiscal Officer Use Only:	
☐ Request Approved	
☐ Requested Rate Adjusted	J
☐ Request Denied	
Reason for Adjustment/Denial	
Fiscal Officer Name	Fiscal Officer Signature
Date	
Date	7