Click or tap to enter a date.

MEMORANDUM FOR XXXXX XXXXXX

FROM: HQ RIO

SUBJECT: Authorization for Use of Fund Cite

1. Use of <Unit Name> funds is approved for <Rank, Name> to travel to <Location> on <Date>
   1. Purpose: Choose an item. Additional Travel Purpose Notes:
   2. Travel Start Date: Click or tap to enter a date. # of Travel Days: 0 # of TDY Days: 100
   3. Total Estimated Cost: $9,000.00
   4. Government Lodging: Available Not Available
   5. Meal Rate: Choose an item.
   6. M4S Number (if applicable):
   7. POV Authorized: Yes No
   8. Rental Car: Choose an item. \*Justify any class other than compact in paragraph 5\*
2. Fund Cite for Pay and Allowances:
3. Fund Cite for Travel: **(\*\*NOTE\*\* For RPA funded orders, provide the WING and OWA for AROWS Cross wing funding)**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Dept | FY | Approp | FCFY | OAC | OBAN | RCCC | EEIC | PEC | BA | ADSN | ESP |  |  |
| 57 | 9 | 3700 | 509 | 62 | 62 | 3AIR00 | 72713 | 59313F | 01 | 387700 | ZA |  |  |

1. You must check with the lodging office for availability of quarters if TDY location is at a military installation. If TDY to an AF Installation and the lodging/mess selection above differs from AFMAN 34-102, detailed justification is required in paragraph 5 for orders processing.
2. Additional Comments/Authorizations/Justifications - \*REMOVE PARAGRAPH IF NOT NEEDED\*: (ex: In & Around mileage, Dual Lodging, Variations Authorized, etc.)
3. If any further information is required regarding this funding, please contact me at DSN XXX-XXXX, commercial (XXX) XXX-XXXX, or by e-mail at xxxxxxx@xx.xx.mil.

JANE DOE, Colonel, USAF

Resource Advisor