



USMEC OVERSEAS TRAVEL FORM

Assemblies of God U.S. Missions

Name

Department

Account number

Date

Trip location

Dates of travel

How is this trip funded?

Purpose of trip (be brief but specific)

Date of AGWM **approval** or **acknowledgment**
(Circle One)

Source of invitation

Attach a copy of

Letter of invitation

Certificate of Insurance

AGWM is handling insurance

U.S. Missions Travel Form

Senior Director's signature

U.S. Missions Executive Committee Action

Date

Approved

Disapproved

Consent signature

(AGUSM Executive Director or Administrator)

***Give originals to AGUSM Accounting and a signed copy to the executive director's executive assistant for USMEC minutes.*