MILITARY AIR PASSENGER/CARGO REQUEST												
NOTE: Keep this data on file for two years after submission date.												
1. SELECT APPLICABLE TRAVEL STATEMENT:												
	Direct support of operational forces engaged in combat <u>or</u> contingency peace-keeping operations directed NCA, <u>or</u> for emergency lifesaving purposes.											
PRIORITY 2	"Required use" travel <u>or</u> compelling operational considerations making commercial transportation unacceptable (within 24 hours). Mission cannot be satisfied by any other mode of travel. Requester should provide a 2-hour window for departure and arrival times to allow consolidation of missions per DoD Directive 4500.43.											
PRIORITY 3	Official business travel which when consolidated by JOSAC with other travelers, is more cost effective than commercial air trave											
2. PURPOSE OF TRAVEL												
a. PUJC CODE b. COMPLETE MISSION DESCRIPTION												
3. TOTAL NUMBER OF PAX	ITY 2 COM	PELLING CONSIDERATI	ONS AND	REASON COMM	ERCIAL TRAVEL I	JNACCE	PTABLE					
4. SENIOR TRAVELI	ER											
a. NAME (Last, First, Mi	a. NAME (Last, First, Middle Initial)			E/DV CODE	c. DUTY TITLE				d. BRANCH OF SERVICE			
5. ADDITIONAL PAS	SENGER	S (Note: Required only	for DV 7	or higher)					I			
a. NAME (Last, First, Mi	ddle Initial)		b. GRAD	b. GRADE/DV CODE c. D		c. DUTY TITLE			d. BRANCH OF SERVICE			
6. DESIRED FLIGHT		b. DEPART DATE/TI	MF (Z)/MO	/YR (+/- 2 hrs)			d. ARRIVE DATE/I	IMF (7)	/MO/YR (+/- 2 hrs)			
a. DEPARTI	a. DEPARTURE ICAO				c. ARRIVAL I	CAO	AO (Example: 25/1200					
(1) LEG 1												
(2) LEG 2												
(3) LEG 3												
7. COST OF COMME	RCIAL TR	RAVEL (Transportation	, addition	al per diem, lost	time, etc.)							
a. LEG 1		b. LEG 2	c. LEG 3			d. TIMES NO. OF PASSENGERS		e. EQU	e. EQUALS TOTAL COST			
		N (Cargo acceptors and	d handlers	s are required at	t destination airfie	əld.)						
a. CARGO DESCRIPTIC)N											
b. LARGEST ITEM DIMENSIONS c. HEAVIEST						c. TOTAL WEIGHT		d. TOTAL CUBIC FEET				
		C. HEAVIEST I	c. HEAVIEST ITEM DIMENSIONS/WEIGHT					d. TOTAL COBIC FEET				
e. SPECIAL HANDLING		MENTS (Explain)										

9. POINT OF C	ONTACT (Must be able	to contact traveler(s)	before departure a	nd after arrival in case of delay(s) or can	cellation(s))				
	a. NAME (Last, First, Mide	dle Initial)	b. GRADE	c. DUTY PHONE (DSN/Commercial)	d. AFTER HOURS (DSN/Commercial)				
(1) DEPARTURE									
(2) ARRIVAL									
10. NON-DV PA	SSENGERS		1	1					
a. NAME (Last, F	irst, Middle Initial)		b. GRADE	c. DUTY TITLE		d. BRANCH OF SERVICE			
	ADDITIONAL COMME								
12. REQUESTE			b. GRADE	c. DUTY TITLE		d. OFFICE SYMBOL			
a. NAME (Last, Fi	rst, Middle Initial)		D. GRADE			d. OFFICE SYMBOL			
e. DUTY TELEPH	ONE (DSN/Commercial)	f. SIGNATURE	1	1		g. DATE (YYYYMMDD)			
	AGE ADDRESS (PLAD)	1				1			
	JTHORIZING OFFICIAL	. (As appointed by Se		1					
a. NAME (Last, Fi	irst, Middle Initial)		b. GRADE	c. DUTY TITLE		d. OFFICE SYMBOL			
e. DUTY TELEPH	e. DUTY TELEPHONE (DSN/Commercial) f. SIGNATURE								
14. SENIOR TRAVELING PASSENGER (Signature may not be delegated)									
a. NAME (Last, First, Middle Initial)			b. GRADE	c. DUTY TITLE		d. OFFICE SYMBOL			
e. DUTY TELEPHONE (DSN/Commercial) f. SIGNATURE			1	g. DATE (YYYYMMDD)					

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