

DEPARTMENT OF TRANSPORTATION U.S. COAST GUARD CG-4251 (TEST)	MILITARY TEMPORARY ADDITIONAL DUTY (TAD) OR CIVILIAN TEMPORARY DUTY (TD) REQUEST AND TRAVEL ORDER	SOCIAL SECURITY NO.
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When signed by Authorizing Official, this form becomes an Official Travel Order.
Request below named person be authorized to perform the following TAD/TD on official business of the Coast Guard.

1. NAME	2. GRADE/RATE	3. DIV/BRANCH	4. EXT.
5. DEPARTURE DATE	6. ESTIMATE DAYS ABSENT	7. ESTIMATED COST	8. REPEAT TRAVEL ORDERS FOR THE PERIOD FROM _____ TO _____

A. Command, District, Firm or Organization. <i>(List in sequence)</i>	B. LOCATION	C. DATE/TIME <i>(If critical)</i>	D. REVISIT <i>(yes/no)</i>
9. Places to visit			

10. REQUEST <table style="width:100%; border: none;"> <tr> <td style="width:15%; border: none;">A. <input type="checkbox"/> REGIS. FEE \$ _____</td> <td style="width:10%; border: none; text-align: center;">NOT APPVD.</td> <td style="width:10%; border: none; text-align: center;">NOT AUTH.</td> </tr> <tr> <td style="border: none;">B. <input type="checkbox"/> EXCESS BAGGAGE (_____ LBS.)</td> <td style="border: none; text-align: center;"><input type="checkbox"/></td> <td style="border: none; text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="border: none;">C. <input type="checkbox"/> LOCAL TRAVEL-TAXI</td> <td style="border: none; text-align: center;"><input type="checkbox"/></td> <td style="border: none; text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="border: none;">D. <input type="checkbox"/> 1ST CLASS JET</td> <td style="border: none; text-align: center;"><input type="checkbox"/></td> <td style="border: none; text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="border: none;">E. <input type="checkbox"/> U-DRIVE/GSA VEHICLE</td> <td style="border: none; text-align: center;"><input type="checkbox"/></td> <td style="border: none; text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="border: none;">F. <input type="checkbox"/> _____ DAYS LEAVE</td> <td style="border: none; text-align: center;"><input type="checkbox"/></td> <td style="border: none; text-align: center;"><input type="checkbox"/></td> </tr> </table>	A. <input type="checkbox"/> REGIS. FEE \$ _____	NOT APPVD.	NOT AUTH.	B. <input type="checkbox"/> EXCESS BAGGAGE (_____ LBS.)	<input type="checkbox"/>	<input type="checkbox"/>	C. <input type="checkbox"/> LOCAL TRAVEL-TAXI	<input type="checkbox"/>	<input type="checkbox"/>	D. <input type="checkbox"/> 1ST CLASS JET	<input type="checkbox"/>	<input type="checkbox"/>	E. <input type="checkbox"/> U-DRIVE/GSA VEHICLE	<input type="checkbox"/>	<input type="checkbox"/>	F. <input type="checkbox"/> _____ DAYS LEAVE	<input type="checkbox"/>	<input type="checkbox"/>	11. MODE OF TRAVEL <table style="width:100%; border: none;"> <tr> <td style="width:30%; border: none;"><input type="checkbox"/> COMMERCIAL CARRIER</td> <td style="width:30%; border: none;"><input type="checkbox"/> GOVT. CONVEYANCE</td> <td style="width:10%; border: none; text-align: center;">NOT APPVD.</td> <td style="width:10%; border: none; text-align: center;">NOT AUTH.</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> PRIVATELY OWNED CONVEYANCE</td> <td colspan="3" style="border: none;"><input type="checkbox"/> It has been administratively determined that this method of travel is more advantageous to the Government, IAW JTR, M4204.5.b.</td> </tr> <tr> <td colspan="4" style="border: none;"><input type="checkbox"/> The total cost to the Government, including per diem, does not exceed the total cost of travel by common carrier, including per diem. <i>(Civilians only.)</i></td> </tr> </table>	<input type="checkbox"/> COMMERCIAL CARRIER	<input type="checkbox"/> GOVT. CONVEYANCE	NOT APPVD.	NOT AUTH.	<input type="checkbox"/> PRIVATELY OWNED CONVEYANCE	<input type="checkbox"/> It has been administratively determined that this method of travel is more advantageous to the Government, IAW JTR, M4204.5.b.			<input type="checkbox"/> The total cost to the Government, including per diem, does not exceed the total cost of travel by common carrier, including per diem. <i>(Civilians only.)</i>			
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12. PURPOSE OF TRAVEL AND JUSTIFICATION(S) FOR REQUIREMENTS CHECKED IN ITEM 10, AND/OR 11.

13. DATE	TRAVEL REQUESTED BY <i>(Signature and Position Title)</i>
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14. Except as noted, TAD/TD is approved and chargeable below.							15. Funds available for request as estimated below.					
DIST	APPN. CODE	LIM. CODE	ALLOT FUND	PROGRAM ELEMENT	COST CENTER	OBJECT CLASS	DOCUMENT ID.				ESTIMATED COST	
							TYPE	FY	TONO NO.	SUFFIX		

14a. DATE	SIGNATURE <i>(Approving Official)</i>	15a. DATE	SIGNATURE <i>(Accounting Division/Branch)</i>
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16. Authorized Civilian mileage <i>(See DOT Travel Manual, 1500.6, Appendix C.)</i> <input type="checkbox"/> _____ <input type="checkbox"/> NONE <input type="checkbox"/> NTE COST BY COMMON CARRIER INCLUDING PER DIEM	17. Authorized CIVILIAN per diem <i>(See DOT Travel Manual, 1500.6, Appendix D/Chapter 4, respectively.)</i> <input type="checkbox"/> _____ PLUS LODGING NTE _____ <input type="checkbox"/> TRAVEL OF 24 HOURS OR LESS <input type="checkbox"/> NONE <input type="checkbox"/> OTHER <i>(Specify)</i> _____
DATE	
SIGNATURE <i>(Authorizing Official, Items 16. & 17.)</i>	

18. FROM:
TO:

1. Except as noted, the approved TAD/TD is authorized and directed. Proceed and report to the places and in the order listed in Item 9, above. Deviations should not be made to visit places or areas not listed in Item 9, above, without prior written or verbal orders from proper authority. Upon completion of the TAD/TD directed, return to this command and resume your regular duties. *(Military per diem is authorized as prescribed in Joint Travel Regulations.)*

DISTRIBUTION:

19. DATE	SIGNATURE <i>(Authorizing Official)</i>
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