

UNITED STATES DISTRICT COURT <small>FEDERAL PROBATION SYSTEM</small> PERMISSION TO TRAVEL	ADDRESS OF PROBATION OFFICE 75 Spring St., S.W., Room 900 Atlanta, GA 30303 (404) 215-1950 Fax: (404) 331-0160
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Name: _____ Date: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____ Phone: _____

Destination: _____

Departure Date: _____ Return Date: _____

Purpose of Trip: _____

Travel Companion(s): _____

Lodging: _____

Lodging Address: _____ Lodging Phone: (____) _____

Contact Person: _____ Contact Phone: (____) _____

Transportation: _____

(Provide vehicle description with year, make, model, color, tag and owner and/or name of airline/flight number, charter, bus, train--attach copy of ticket.)

I agree to abide by the terms of the travel permit and furnish prior to and/or upon return, a resume of my itinerary including temporary residence, personal contacts, and/or any other information requested by the Probation Officer, and to abide by any special instructions on this permit. Any deviation of my agenda requires written consent of the Probation Office.

 Applicant's Signature _____
 Date

Travel request is approved. Contact U. S. Probation Office within 24 hours of your return.

 U. S. Probation Officer _____
 Date

REPORTING INSTRUCTIONS: