Economic Services Administration (ESA)
Community Services Division (CSD)

Mental Incapacity Evaluation (MIE)
Contractor Travel Plan

To be completed and approved / denied for all travel plans for MIE contractors ONLY. **Please complete form electronically.**

1. Traveler Information: **This section must be completed or form will not be valid.**			
Contractor's Name	DSHS Contract Numbeer	Contract Start Date and End Date	
Contractor's Phone Number	Contractor's Cell Number	Contractor's Email Address	
Contractor's Residence Address	City	State	Zip Code
Contractor's Office Address	City	State	Zip Code

2. Travel Itinerary: **Please enter each itinerary separately. Please choose from drop-down menu provided in SELECT fields.**				
Starting Location (Residence / Office: **Must enter whichever starting point is most economical for the agency.**	To (Community Services Office): **If traveling to multiple destinations in the same itinerary, check box and list additional destinations.**	Total Mileage (One Way)	Total Mileage (Round Trip)	Number of Trips per Month
1. **Select starting location.**	**Select CSO.** ☐ MULTI-DESTINATION (LIST BELOW):			
2. **Select starting location.**	**Select CSO.** ☐ MULTI-DESTINATION (LIST BELOW):			
3. **Select starting location.**	**Select CSO.** ☐ MULTI-DESTINATION (LIST BELOW):			
4. **Select starting location.**	**Select CSO.** ☐ MULTI-DESTINATION (LIST BELOW):			
5. **Select starting location.**	**Select CSO.** ☐ MULTI-DESTINATION (LIST BELOW):			

3. Travel Expense Estimated: **Less than 100 miles one way - you are NOT eligible for lodging or meals.**			
Item of Expense	Number of Days per Month	State Travel Rates*	Estimated Costs
Lodging: **Must be scheduled for a full day, at least five (5) appointments.**			$ -
Meals: **Must be eligible for lodging to claim reimbursement for meals.**			$ -
Incidentals (i.e., bridge tolls, ferry tickets, etc.)			
Total mileage			$ -
		Total	$ -

4. Signatures and Approval / Denial			
Contractor's Signature Date	DSHS Signature	Date	
DSHS Printed Name Title	Approval Status	Travel Plan Review Date	
Comments			

*To view current published state travel rates, visit: http://www.ofm.wa.gov/resources/travel.asp