

West Virginia University Airplane Reservation Form

1. General business purpose for trip: Trip 1 - To provide clinical services in Southern West Virginia
2. Department contact/ phone number: Trip 1 - Star Hammond/[REDACTED] Julie Peasak/[REDACTED]
3. Destination airport (if known): Trip 1 – Charleston Airport
Trip 2 – Morgantown Airport
4. Destination address: _____

Leg:	Trip date:	Departure City:	Departure Time:	Arrival City:
1	12/19/2019	Morgantown, WV	7:00 am	Charleston, WV
2	12/19/2019	Charleston, WV	7:00 pm	Morgantown
3				
4				

	Name	Cell number	Department	VP Division	Business Justification	Code
1						3
2	Judy Charlton, MD	[REDACTED]	Ophthalmology	WVUSoM	Clinical Services	3
3	Rachel Montgomery, MS	[REDACTED]	Ophthalmology	WVUSoM	Clinical Services	3
4	Ahmed Zanabli, MS	[REDACTED]	Ophthalmology	WVUSoM	Clinical Services	3
5	Reed Andrews, MS	[REDACTED]	Ophthalmology	WVUSoM	Clinical Services	3
6						3

5. Lead passenger name / cell number: Trip 1 – Judy Charlton [REDACTED]
Trip 2 – Judy Charlton [REDACTED]
6. Ground transportation:
 - No ground transportation required.
 - I prefer to set up my own ground transportation.
 - I prefer to have LJ Aviation set up ground transportation. Details: Will need to rent an Enterprise SUV, or Van and have it at the airport. There will be 4 people going.
7. Catering:
 - No catering required.
 - Catering is required. Details: Trip 1 & 2 snacks and beverages available

8. Signature of WVU President, Vice President, Chancellor or designee:

[Signature] Date: 12/18/19

For internal use:

9. Approved by WVU President's Office: [Signature] Date sent to LJ Aviation: 12-18-19
Printed name: Amy Garbrick Updated: 12/29/2014