

TRAVEL ADVANCE

DATE(s) OF TRAVEL: _____

DESTINATION(s): _____

PURPOSE FOR TRAVEL: _____

AMOUNT REQUESTED: _____

INDEX & ACCOUNT CODE: _____

“If I do not file the reimbursement Travel Voucher within 5 days of my return, I hereby authorize the necessary deduction from my payroll check to pay the travel advance to the University”.

PERSON TRAVELLING

Print Name: _____

Signature: _____

Date: _____

DEPARTMENTAL APPROVAL

Print Name: _____

Signature: _____

Date: _____

Original to Accounts Payable

Cc: to Comptroller