

REQUEST FOR TRAVEL ADVANCE

FUND	ACCOUNT	INST	DIV	DEPT	ACT	CLASS	Purpose of Trip/Justification(s)								
991	000				1	2199	(See Instruction #4 lower left)								
Name (Last)		(First)			(Initial)										
Send check to: (Campus Inter-D Address Preferred)							Call _____ For Pickup								
SS #		Type of Trip		Date Required			Dates of Trip								
		Single Continuous Group					(From) _____ (To) _____								
<p align="center">Instructions</p> <ol style="list-style-type: none"> Consult UW Travel Regulations or institution policy for eligibility requirements Advance amount limited to 80% of reimbursable expenses for individual travel (100% group) Exclude from estimate all costs to be billed to the University or which will be charged to your corporate card. Estimate cannot exceed maximums without justification. Specify above. The advance cannot exceed 30 days estimated expenses for domestic travel, 90 days for foreign travel. Initiate advance request two weeks prior to departure. Sign and forward through regular channels. Retain traveler copy for submission with your travel expense report. 							Destination(s)								
													<p align="center">Traveler Complete this Portion (See instructions on the left)</p>		Amount (Omit Cents)
													1. Estimated Reimbursable Expenses for Meals		
													_____ people x _____ days x _____ per day		
													2. Estimated Reimbursable Expenses for Lodging		
													_____ rooms x _____ days x _____ per day		
													3. Transportation Cost to be Reimbursed to Traveler		
						Air RR or Bus Auto									
						4. Other (Specify)									
						5. Subtotal of Reimbursable Expenses									
						6. Total Advance Allowed/Requested									
Advance must be returned immediately if the trip is cancelled or accounted for with 30 days after completion of trip or the advance will be deducted from employee's next paycheck.				I certify that I have reviewed this request and find the estimated costs are reasonable based on the itinerary and that the request is otherwise proper and necessary.											
Traveler--Signature				Date		Department Chair/Supv.		Date							
								Inst. Approval							
								Date							