



Memorial

University of Newfoundland

TRAVEL ADVANCE REQUEST

In accordance with Policy T-1.3.1, I request a travel advance be issued in the amount of \$ _____ This advance is requested on the following grounds: (Please indicate)

Applicant: _____ **Department:** _____

Advance seat sale airline tickets (copy attached)	\$ _____	Date Required	_____ / _____ / _____
Travel to a location where corporate cards are not accepted	\$ _____	mm	dd
Incidental expenditures	\$ _____		
Extended field travel	\$ _____		
Other (please specify)	\$ _____		
Total advanced requested	\$ _____		

Applicant's signature _____ Date _____ / _____ / _____
mm dd yy

Approved by: _____ Amount Approved \$ _____

Name of Conference: _____ Place _____ Conference Date _____ / _____ / _____
mm dd yy

ACCOUNTING DETAILS

FAAINVE

INVOICE DOCUMENT #	VENDOR #	DUE DATE	BANK #
M M D D Y Y			
I			

VENDOR INVOICE #

--	--

FOAPAL

FUND	ACCOUNT

ACCOUNTING DETAILS

FGAENCB – COMMITMENT

ENCUMBRANCE #	NAME OF APPLICANT
E T	

DOCUMENT TOTAL

--	--	--

FOAPAL

FUND	ORGANIZATION	ACCOUNT	PROGRAM	ACTIVITY	LOCATION	AMOUNT
FUND	ORGANIZATION	ACCOUNT	PROGRAM	ACTIVITY	LOCATION	AMOUNT

"TRAVEL REQUEST" FORM MUST BE ATTACHED

Please forward all copies to Financial & Administrative Services. Copy four will be returned. Financial Services Approval

- NOTES:
1. The advance must be requested from the Department of Financial & Administrative Services at least 10 working days prior to the date required.
 2. Should this travel not take place, any advance already issued will be returned immediately to the Department of Financial & Administrative Services.
 3. The final travel claim should be submitted within 10 days after completion of travel.
 4. Do not complete shaded areas of this form.