



Office of Facilities & Services Travel Authorization

_____	_____	_____	_____
Name	Shop	Work Order	Today's Date

Banner ID			

Purpose of Trip:

<u>Travel Destination(s):</u>	<u>Date(s) & Time(s) of Travel:</u>
	Departure:
	Return:

Claiming:

Per Diem Actuals Travel Advance

<input type="checkbox"/> Registration \$ _____	Vendor Name: _____
<input type="checkbox"/> Meals Provided	
<input type="checkbox"/> Airfare	Airline: _____
<input type="checkbox"/> Rental Car	Size: _____
<input type="checkbox"/> Service Vehicle	
<input type="checkbox"/> Motor Vehicle	
<input type="checkbox"/> Motel	Name: _____
<input type="checkbox"/> Other: _____	

Approved by: _____

Supervisor Signature Print Date

Approved by: _____

Director Signature Print Date