Auburn University

REQUEST FOR AUTHORITY TO TRAVEL

AN AUTHORITY TO TRAVEL AND/OR INCUR EXPENSES IN PERFORMANCE OF OFFICIAL DUTIES ON BEHALF OF AUBURN UNIVERSITY IS REQUESTED BY:

(Traveler) (Title) (Department)

1. Nature and purpose of travel request: _____

(Attach the Conference, Workshop, etc. notice – if applicable)

2. Itinerary: _____
3. Time and date travel begins: _____ Ends: _____
4. Time and date meeting begins: _____ Ends: _____
5. Estimated Costs:

Transportation	___	Total Class Airfare (receipt required)	
	___	Train Fair (receipt required)	
	___	Personal Car: Mileage _____ @ current state rate	
	___	Airfare in-Lieu-Of Mileage (Quoted by _____ in Accounts Payable)	
	___	University Vehicle (to be paid by ITV)	
	___	Rental Vehicle – including gasoline and tolls (receipts required)	
	___	Taxi/Bus/Subway Fares	
		Parking (receipt required)	
Subsistence:			
In-State	___	Per Diem _____ Days @ current state rate	
Out-of-State	___	Lodging – actual expenses (receipt required)	
	___	Meals – actual expenses not to exceed current A.U. rate per day	
	___	Guests Meals – actual expenses not to exceed current A.U. rate per day per person (receipt and guest list required)	
6. Registration:	___	To be paid by traveler (receipt and copy of program required)	
	___	To be paid separately by vendor voucher (copy of approved) R.A.T. required)	
7. Honorarium:	___	Attach agreement/correspondence – lump sum payment only (no Expenses allowed)	
8. Miscellaneous Expenses:			
	___	FAX and Telephone (receipt & itemization required)	
		OTHER: (receipt and itemization required)	
9 TOTAL ESTIMATED COSTS:			

10. Remarks: _____

11. Account Name _____ Account # _____
    Account Name _____ Account # _____
12. Signatures:

Travler/Date

Department Head/Date

Dean/Director/Date

Other/Date

President/Date
(honoranum and Foreign Travel)

DISTRIBUTION: White-attach to voucher Yellow-Department Head Green-Dean/Director

UBO 55/04