

Florida International University

The State University of Florida at Miami

Controller's Office University Park CSC-310 Miami, Florida 33199

Application for Advance on Travel Expenses

Payee: _____ Extension: _____ Panther ID #: _____

Dep't. Name: _____ Dep't/Proj ID: _____

Travel Period: _____ through _____ Destination: _____

Purpose of Travel: _____

Justification - Statement of purpose or benefit expected to be derived to serve the interest of Florida International University. Explain nature of emergency or reason for not using University Purchasing System, attach additional page as needed:

Estimated Cost of Travel:

* Meals \$ _____ per day x _____ days = \$ _____

* Hotel \$ _____ per day x _____ days = \$ _____

Incidental Expenses:

Type: taxi \$ _____

Total Incidental Expenses = \$ _____

Total Estimated Expenses = \$ _____

x 80%

TAR # :

Advance Travel Allowed = \$ _____

I hereby certify that I am an **Employee**, and that the above estimated expenses are anticipated to be incurred by me as necessary traveling expenses in the performance of my official duties; attendance at the conference or convention directly relates to the official duties of the agency; any meals or lodging included in the registration fee have been deducted from this travel advance request. If the travel advance exceeds actual travel expense incurred, I will refund to FIU the remaining unexpended funds within ten (10) workdays after completion of the travel period. If the travel advance is not settled within ninety (90) days upon completion of the trip, I authorize Florida International University to collect the appropriate amount through payroll deduction from my salary and/or any vacation owed to me in the case of my separation from University employment.

Traveler's Signature: _____

Title: _____ Date Prepared: _____

Pursuant to Florida International University Travel Policy, I certify or affirm that the above anticipated travel will be on official business of the University, and that I will comply with all aspects of the University travel policy.

Supervisor Signature: _____ Panther ID Num _____

Title: _____ Date Prepared: _____