

# Request for Travel Funds

MUST BE SUBMITTED PRIOR TO TRAVEL

*Please fill in all areas where applicable:*

Traveler Name:	UNT Title:		
Home/Street Address:	City, State, Zip:		
Email:	Phone:		
Empl ID/Student ID:	Destination (City/State):		
Trip Dates:	Travel by:	Air	Mileage if personal car:
		Car	

Purpose of Trip (include name of conference, if applicable)
If you have more than one travel request this year, what is this trip's priority?
Additional funding sources & amount?

When requesting reimbursement, all expenses must be provided (estimate if necessary)

Registration Fee:	Meals per diem? _____
	If no, Estimated amount for meals: _____
	Rental Car: _____
Lodging Fee:	Mileage to Airport (personal car)
	DFW:                    X                    =
	Love:                    X                    =
Airfare:	Parking:                    Taxi/Shuttle:
Other (registration, service fees, etc):	
Total Travel Expenses Requested:	

**FOR ADMIN USE:**

Approved Amount:	Approved by (print name): _____
	Signature of Chair/Acct Holder: _____

Account Detail (chart string)

Organization Department 6 digits	Fund Cat 3 digits	Fund 6 digits	Function 3 digits	Project 6 or 7 characters	Activity 3 digits	Program 4 digits	Purpose 5 digits	Site

Please be aware, the department is limited in its ability to refund costs of travel, therefore, you will be responsible for all remaining balances not reimbursed.

RECEIPTS WITH PAYMENT SOURCE ARE REQUIRED FOR ALL REIMBURSEMENTS  
 SUBMIT AFFIDAVIT FOR CHARGES IF RECEIPT IS LOST OR NOT AVAILABLE