

TA Request should be submitted AT LEAST one month prior to trip.

Travel Form

TR's may take up to two weeks to process reimbursements.

Name: _____ A#: _____ Date: _____

Email: _____ Phone: _____ Department: _____

Departure Date: _____ Location: _____ Time: _____ a.m. p.m.

Return Date: _____ Location: _____ Time: _____ a.m. p.m.

Destination City: _____

Reason for Travel/Purpose: _____

Additional Travelers: _____

Emergency Contact: _____

Travel Authorization (TA) **OR** **Travel Reimbursement (TR)**
(estimated expenses before trip) (actual expenses after trip)

Index number to charge: A _____
Percent or Amount: _____

Index number to charge: A _____
Percent or Amount: _____

Airfare: _____

Transportation: _____
(Taxi/Bus/Shuttle in destination city)

Registration: _____

Parking: _____

Lodging: _____

Misc. fees: _____
(baggage, rental car, etc.)

Mileage: _____

Motor Pool Vehicle: _____

Salt Lake Express Shuttle: _____

International Travel: No Yes (SOS insurance)

Per Diem (list number of MEALS PROVIDED/included in registration):

Breakfast: _____

Lunch: _____

Dinner: _____

Notes/Information:

Please return this completed form and ALL OF YOUR RECEIPTS to Jennifer Lyons at jennifer.lyons@usu.edu