



APPLICATION FOR ADVANCE ON TRAVEL EXPENSE

Prepared By: _____

PO NO. _____

Phone #: _____

Vendor _____

Vendor ID# _____

Headquarters _____

Department / Project # _____

Travel Period _____ thru _____
(date) (date)

Destination _____

Purpose of Travel: _____

Benefit to UCF: _____

Estimated Cost of Travel:

\$ 36 (meals) X _____ days = \$ _____

\$ _____ (lodging) X _____ nights = \$ _____

\$ _____ + _____ = \$ _____ X 80% = _____ TOTAL ADVANCE REQUESTED

Estimated cost for the airline ticket and rental car charges which are billed directly to the University shall not be included in the travel advance calculation.

I hereby certify 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 a conference or any meals or lodging included in a registration fee have been deducted from this travel advance request. I will submit my reimbursement voucher to Finance and Accounting within 10 working days after completing the travel and refund to the University any unexpended funds not used or approved for travel expenses. I understand that the University has the option of deducting the entire amount of the advance from my payroll (over and above the hourly minimum wage) if my RV is not submitted within the 10 working day period.

Pursuant to Section 112.061, Florida Statutes, I hereby certify or affirm that the anticipated travel will be on official business for the University of Central Florida.

Employee's Signature

Title

Date

Supervisor's Signature

Title

Date

***Please provide an explanation if the in-state or out-of-state daily single occupancy lodging rate exceeds \$200.00 + taxes.**

Note: In order to ensure that payment is received prior to commencement of travel, please submit the completed form to Finance & Accounting **21 days in advance** of departure date.