

NICHOLLS STATE UNIVERSITY TRAVEL ADVANCE

New Document	<input type="checkbox"/>
Revised	<input type="checkbox"/>

INSTRUCTIONS:

- A. Complete this form and submit to supervisor for approval.
- B. Forward the original plus 2 copies of the signed authorization to Controller's Office at least 10 working days prior to date needed.
- C. Attach copy of conference registration form if applicable.
- D. Travel advance check must be picked up in Controller's Office.
- E. Travel advance must be over \$100.00.

1.	Traveler's Name:	Insert N# below:			
2.	Purpose of Trip:				
3.	Destination:				
4.	Departure Date:	Return Date:			
5.	Amount of Advance: \$				
6.	Name of department to be charged:				
7.		Fund	Organization	Account	Program
	FOAPAL			1320	
8.	Date Advance is Needed:				
9.	Traveler's Signature	Date:		Phone #:	
10.	Supervisor's Signature			Date:	
11.	Controller's Signature				

Acknowledgment

I acknowledge receipt of check no. _____ for the above advance and agree to settle this advance on or before _____.

If not settled when due, I hereby authorize that any unsettled balance be deducted from any sum due me for services or otherwise.