WESTERN ILLINOIS UNIVERSITY

Travel Advance

(This form for use by student groups and athletic teams only.)

Section 1				
Organization Name:		Date:		
Location/Address:				
Person in Charge:				
Name of Preparer:		Phone:		
Account #:				
Purpose of Travel:				
Destination:				
Estimated Departure Date:		Time:	am	pm
Estimated Return Date:		Time:	am	pm
Number of Travelers in Group):			
Costion C. Traval Advance (n.		
Section 2 - Travel Advance (•	,		
Transportation:	\$	_		
Lodging:	\$	<u> </u>		
Meals or Meal Allowance:	\$	_		
Other Expenses:	\$	<u> </u>		
Total Advance:	\$	_		
Note: check will be made pa	avable to the individual in	charge as identified above.		
This certifies that the undersigmoney expended will be for b	gned accepts full and complousiness purposes and within	ete responsibility for the money requested the guidelines of Western Illinois University see supplied for reconciliation of any expensions.	ity Travel Re	
Signature of Person in Charge		Date		

INSTRUCTIONS FOR COMPLETING TRAVEL ADVANCE FORMS

The Travel Advance Form should be prepared with an original and two copies. The original and one copy should be forwarded to Travel Services, and one copy is for your files. The following information is to assist you in preparing the form:

Section 1: (Self-explanatory)

Section 2: Estimate of acceptable funds needed for your trip.

<u>Transportation:</u> Include only transportation expenses to be paid from the Travel Advance. Do not include transportation expenses which are to be paid by separate WIU check.

<u>Meals or Meal Allowance:</u> Include number of people and be sure not to exceed the maximum allowable per person.

<u>Lodging:</u> Include number of people and be sure not to exceed maximum allowable per person.

Other Expenses: Include items such as taxi, car rental, phone, etc.