

West Virginia University Travel Authorization

Traveler: _____ Title: _____

Address: _____ FIMS # _____

_____ Status: Employee: _____ Student: _____ Other: _____

Travel Date(s): _____ Destination: _____

Purpose of Travel: _____

ESTIMATED TRAVEL COSTS					
	Direct Bill	Procurement Card	Reimbursable Expense	Personal Expense	Private Funding
Personal Vehicle					
State Vehicle					
Car Rental					
Commercial Airfare					
Lodging					
Meals					
Registration Fees					
Miscellaneous (i.e. parking, taxi)					
TOTAL FOR TRIP:					
				GRAND TOTAL:	

Pcard Holder's Name: _____

Pcard Holder's Name: _____

ORACLE ACCOUNTING INFORMATION	AMOUNT

Traveler's Signature _____ Date _____

Principal Investigator _____ Date _____
(If Applicable)

Dean/Director/Designee _____ Date _____

Form Instructions: After appropriate signatures, forward original completed form to travel coordinator and a copy of form to Department Card Coordinator if a procurement card is being used.

Receipt Instructions: Original receipts for any reimbursable expenses are to be turned into the travel coordinator. Original receipts for the procurement card charges must be turned into the Department Card Coordinator within 48 hours upon completion of trip.

Note: Copy of expense account, travel authorization and receipts must be retained in the department. All forms are subject to internal audit.