

TRAVEL AUTHORIZATION

Traveler's Name:		Univ. ID#:	UNCG EMPLOYEE? <input type="checkbox"/> Yes <input type="checkbox"/> No	Contact Tel. No.:	Date Filed:
Address:		Are you a student? <input type="checkbox"/> Yes <input type="checkbox"/> No	Citizenship status: (Choose one) <input type="checkbox"/> US Citizen	Legal Permanent Resident-Attach Form I-551 Non-Resident Alien-Attach NRA001 w/req docs	
Destination:	Description: <input type="checkbox"/> Official State Business <input type="checkbox"/> Academic Credit OR <input type="checkbox"/> Student Activity			Estimated Cost of Trip:	
Period Covered by this Voucher					
Leave Date:	Time Left:	AM	Return Date:	Time Returned:	AM

I have read and understand the University Travel Policies. ([Travel Manual](#))
I understand that travel reimbursements should be submitted to Accounts Payable within 30 days. Travel requests must be complete and accurate. Per IRS accountable plan guidelines, any travel reimbursement requests submitted 60 days or later after the return date will be taxable to the traveler. I understand my responsibility as a traveler for the University. In the event a travel advance is issued to me, I have read and understand the Travel Advance Loans Policy. If I fail to repay the travel advance loan, I agree that the University may deduct the amount of the advance from my next paycheck. (If international travel, please visit: [UNCG Export Control](#))

I have read, understand, and approve this travel, including the amount to be advanced below.
Fund: _____ Adv Loan Amount (To Traveler): _____

I approve lodging, registration fee and meals (for out of country travel only) in excess of the allowed rate, use of personal vehicle and /or airport parking for the trip described above as a necessary University expense. If traveler is student non-employee, also please attach completed [TRV-S Agreement](#). (Cross out any above phrases that are not approved)

Traveler's Signature _____ Date _____ Supv/Dean's Signature _____ Email _____ Date _____

UNCG DIRECT PAYMENTS TO VENDOR(S) THRU A/P

COA	Index/Fund Number(s)	Fund Initials	Attach original invoices					
G ↓			Air		\$			
			Hotel		\$			
			Registr		\$			
						Vendor Name(s)	Amount(s)	Acct Codes

DOCUMENT NUMBER: MULTIPLE <input type="checkbox"/>	Invoice Date: (MMDDCCYY)	Transaction Date:	Bank	CM	Due Date:
VENDOR NUMBER:	Document #:				

REIMBURSEMENT OF EXPENSES PAID BY TRAVELER OR CHARGED TO PCARD

Transportation:	Reimbursable Amounts (To be paid)	In-State	Out-of-State	Out-of-Country	Non-Employee	PCard	
						TXN No.	Amount
Air (attach receipt) =		223010	223020	223030	223220		
Bus/Rail (attach receipt) =		223040	223050	223060	223220		
Rental Car / Taxi (attach receipt) =		223040	223050	223060	223220		
Mileage - Select Only One: (Unless using travel log)							
Total Mileage x 58¢ 100 miles or less per trip =	0.00	223040	223050	223060	223220		
Total Mileage x 33¢ More than 100 miles per trip =	0.00	223040	223050	223060	223220		
Total Mileage x 30¢ =	0.00	223040	223050	223060	223220		
Subsistence:							
Hotel _____ nights @ _____ =	0.00	223110	223120	223130	223320		
Breakfast _____ meals @ _____ =							
Lunch _____ meals @ _____ =							
Dinner _____ meals @ _____ =							
Total Meals =	0.00	223140	223150	223160	223320		
Registration (attach receipt/proof of payment) =		234510	234520	234530	223320		
Other (attach explanation or use back of form) =	0.00	223170	223180	223190	223320		
COA	Index/Fund Number(s)	Fund Initials	Amt. Reimbursed		<i>PCard Not Used - Fund Initials</i>		
G ↓					Comments:		
Total Travel Expenses to be Reimbursed		0.00					
Entertainment (Attach receipt on reverse side. Describe who was entertained & business purposes of entertainment.)							
Non-State Fund to Charge for Entertainment: _____		-221322					
Entertainment -Fund Holder's Initials							
Less Travel Advance Loan Received:							
Total Due Traveler/(UNCG):		0.00		Print Name		Tel. No	

Under penalties of perjury I certify this is a true and accurate statement of my citizenship and of the lodging, expenses and allowances incurred in the services of the State.

I have examined this reimbursement request and certify that it is just, necessary and reasonable, and in compliance with University policies.

Traveler's Signature _____ Date _____ Supv/Dean's Signature _____ Email _____ Date _____

Basic Procedure for Completing TRV-1; Travel Authorization/Expense Report

If no travel advance loan or vendor payments are required:

- For travel involving an overnight stay, it is required that the traveler complete the TRAVEL AUTHORIZATION section of the form and obtain the proper approval(s) before the travel is to take place, even if no travel advance loan is requested. Retain this signed form until completion of travel.
- The REIMBURSEMENT OF EXPENSES PAID BY TRAVELER OR CHARGED TO PCARD section must be completed by the traveler upon completion of the trip and submitted to Accounting Services no more than 10 business days after the travel is complete.

If a travel advance loan or vendor payments are required:

- The TRAVEL AUTHORIZATION, FUND NUMBER and AMOUNT of ADVANCE and UNCG DIRECT PAYMENTS TO VENDOR(S) THRU AP sections must be completed. Please note that some registrations are due well in advance of the beginning of a conference. A **copy** of the form is to be sent to Accounts Payable at least 10 business days prior to travel, or 10 business days prior to any registration deadline, whichever is earliest.
- The REIMBURSEMENT OF EXPENSES PAID BY TRAVELER OR CHARGED TO PCARD section must be completed by the traveler upon completion of the trip and submitted to Accounting Services no more than 10 business days after the travel is complete.

Completing the TRAVEL AUTHORIZATION SECTION:

- Check the appropriate box for reason for travel. (Official State Business occurs when a University employee or other person is traveling to attend approved job related training, work, on behalf of, officially represent, or provide a state service upon the University's request. Academic Credit and Student Activity are for student use only.) For student travel authorized to be paid from state funds (see Travel Policy 8), advance approval of the Dean is required. Enter Description of reason for trip.
- If the travel is for a Non-Resident Alien, complete and attach a NRA001 form with required documentation. Legal residents must attach copy of Form I-551 (green card). If a tax treaty is claimed to exempt withholding taxes, call Accounts Payable for an IRS 8233 form. Only certain visa types are eligible to receive the benefit of the University paid travel.
- The worksheet below is to assist in the 'Estimated Cost of Trip' box. The 'Estimated Cost of Trip' should only be for amounts to be reimbursed by the University.

Transportation:	Air/Bus/Rail	=	
	Mileage _____ x _____	=	
Subsistence:	Hotel _____ nights @ _____	=	
	Meals _____ days @ _____	=	
Other:	Registration	=	
	Other	=	
	Total Expenses:	=	0.00

Other Expenses (itemize):	Amount	Acct #
Carry this total to "Other" on front of form:	0.00	

Completing the UNCG DIRECT PAYMENTS TO VENDOR(S) THRU A/P section:

- If advance payment of airfare, registration, or other charges is required, complete the necessary items in this section and attach the appropriate invoices for payment. Send a **copy** of the partially completed form to Accounting Services for processing. The original should be kept by the traveler for completion at the end of the travel.

Completing the REIMBURSEMENT OF EXPENSES PAID BY TRAVELER or CHARGED TO PCARD section:

- Complete the transportation, lodging, registration and other expenses (ex: gas, parking, tolls, phone, etc.) of this form showing actual expenses. Fill in the amounts to be paid in the Reimbursable Amounts column and select the appropriate account code. Attach **original** receipts.
- Any 'other' expenses must either have an attached explanation/receipts or the explanation may be written in the Other Expenses section.
- List the six-digit fund(s) to be charged for the travel expense. Fill in amounts reimbursed. If the Supervisor's Signature at the bottom of the form is not the same as the fund holder for any six-digit fund listed, the fund holder must initial beside the fund number.
- Any entertainment expenses must be explained as to who was entertained and the business purpose of the entertainment, and itemized receipts must be attached. These expenses may not be charged against a state fund (11xxxx).
- Reconcile any amount due the traveler/amount due UNCG at the bottom of the section. If an amount is due UNCG, the amount should be in parenthesis and a check attached to the form for the amount due. **DO NOT SEND CASH.** Make check payable to UNCG.
- Fill in the TXN number(s) and amounts beside each transaction in the Pcard column. Attach **copies of the Pcard travel receipts.**
- Write the fund number and account number on the PCard receipts showing where the PCard expenses were charged.
- Any one time payments to purchase air transportation, hotel, registration or other should be submitted to Accounts Payable showing in the TXN number in the PCard column on the TRV-1. **If PCard was not used, fund holder must place initials in box.**
- Print name and date of person completing TRV-1 form.
- The completed form should be signed by the traveler and his/her supervisor and sent (with check if applicable) to **ACCOUNTS PAYABLE, 270 MOSSMAN BUILDING.**

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