

Financial Services
 PO Box 3010 Kamloops BC V2C 5N3
 Tel (250)828-5000 Fax (250)371-5601

Vendor # _____

Travel Advance Request or Expense Claim Form *(Circle one)*

Travel Destination: **British Columbia – Canada – International**
(Circle one)

Name: _____
 Department: _____
 Campus address: _____
 Contact phone: _____

Date of Request: _____
 Purpose: _____
 Destination: _____
 Departure Date: _____
 Return Date: _____

Delivery method: _____ Home _____ Hold for pick up at Campus Cashier

(By default cheque will be mailed to campus address. Please select **ONLY** if alternate delivery method required.)

TOTAL EXPENSE (including HST)

Travel Advance Requested: \$ _____

Daily Meal Allowance:

Full day _____ days x \$60.00

Breakfast _____ days x \$12.00

Lunch _____ days x \$18.00

Dinner _____ days x \$30.00

Incidentals _____ days x \$10.00

Daily Accommodation:

with Relatives: _____ days x \$40.00

Hotel Accommodation: _____ nights

Travel by: Pavement: _____ kilometres x 50¢

Pavement: _____ fixed rate

Air: _____

(Please note that TRU does NOT pay for travel insurance)

Other Travel Expenses:

Vehicle Rental: _____

Fuel Expense: _____

Conference/Registration Fees: _____

Other Transportation (parking, taxi, bus, ferry, etc.) _____

Account Code:	Fund	Org	Acct	Program	Activity	Location
			750010	999999		
			75X210	999999		
			75X310	999999		
			75X010	999999		
			75X110	999999		
			75X012	999999		
			75X013	999999		
			75X410	999999		
			75X411	999999		

Other Travel Expenses:

Other: (please specify)

_____	_____
_____	_____
_____	_____

TOTAL EXPENSE
(including HST)

Less Advance (as per attached form) ()

Account Code:	Fund	Org	Acct	Program	Activity	Location
			750010	999999		

To enable efficient operations, a difference of \$2.00

or less will not normally be charged nor refunded

\$ _____	\$ _____
Reimbursement Attached	Refund Requested

Claimant: _____

Note: Please do not forward cash through the interdepartmental mail.

This form requires appropriate one-up approval as determined by TRU spending authority policy.

VP (or AVP TRU World) approval needed for out of Canada travel ONLY.

APPROVAL			FINANCE USE ONLY		
Signature	Name	Title		Reviewed:	_____
Signature	Name	Title		Invoice #	_____
Signature	Name	Title			

****Please ensure all receipts are attached as required by TRU Travel Policies****