

Travel Authorization

TA Numbe	er must	be as	signed
BEFORE Tr	avel		

•	IA Number:

No assignment of TA# will cause delay in reimbursement and/or processing

Employee	Inform	ation:											
AB Number:	Eı	mployee Nam	2:	- 			Emplo	Employee's Signature:					
Danisian Tislan													
Position Title: Department:													
Phone Numbe	r:	Mobil	e Number:			I have a Navajo Nation PCard		ation PCard	Travel Advance Required Depart		Departm	ent Number	
Travel Itinerary Information:													
Date of Travel Request: Purpose of Travel:													
Date of Depa	arture:		Trav	el Itinerary: _									
Date of Retu	rn:		т	ribal Vehicle:			Veh	icle Number:					
Private Vehic	cle:		Mileage Ra	te:		Estimate Miles:							
Private Vehic	cle Insura	nce:				Policy Nu	mber:			Expire	Date:		
Travel Cos	st Estim	ate:											
F	Ohiret		Primary Expense			Distributi	ion Expe	on Expense Distr			ribution Expense		
Expense Category	Object Code	Company	Business Unit	Amount	Company	/ Busir	ness Unit	Amount	Company	Business Unit	Amount	Category Total	
Meals	3240												
Lodging	3250												
Mileage	3260												
Misc	3290												
Airfare	3320												
Vehicle Rental	3220												
Contract Accounting Use Only:							Total Travel Cost Estimate:						
External Fund				10	0.0256	.0256 Total Advance Meals & Lodging:							
Airfare Fli	ght Info	ormation:											
Full Name or	n Issued G	overnment	ID:										
Date of Birth: Gender: Email Address:													
Airfare Confirmation:													
Airfare Confirmation Date: PCard				Card Type:	1	General Fund	:	E	xternal Fund:				
Who Booked Airfare:													
Department Manager Signature: Date:													
Travel Advance Authorization: Date:													

INSTRUCTIONS

- 1. Print Travel Authorization, Employee signature and Department approval signature and date.
 - If no Travel Authorization advance amount, retain and attach to completed Travel Expense Report.
 - If Travel Authorization advance request amount, require Department approval signature and date. Submit to Accounts Payable section/Office of the Controller for processing.
- 2. FOR EXTERNAL BUSINESS UNIT FUNDS, forward signed Travel Authorization to Contract Accounting section/ Office of the Controller for review and funds availability approval **prior to travel departure**.
- 3. TRAVELERS: OBTAIN REQUIRED ITEMIZED RECEIPTS FOR ALL EXPENSES.