



The Navajo Nation

Travel Authorization

TA Number:

Employee Information:					
AB Number:	Employee Name:			Employee's Signature:	
Position Title:			Department:		
Phone Number:	Mobile Number:		I have a Navajo Nation PCard	Travel Advance Required	Check Distribution Code

Travel Itinerary Information:	
Date of Travel Request: _____	Purpose of Travel: _____
Date of Departure: _____ Travel Itinerary: _____	
Date of Return: _____ Tribal Vehicle: _____ Vehicle Number: _____	
Private Vehicle: _____ Mileage Rate: _____ Estimate Miles: _____	
Private Vehicle Insurance: _____ Policy Number: _____ Expire Date: _____	

Travel Cost Estimate:											
Expense Category	Object Code	Primary Expense			Distribution Expense			Distribution Expense			Category Total
		Company	Business Unit	Amount	Company	Business Unit	Amount	Company	Business Unit	Amount	
Meals	3240										
Lodging	3250										
Mileage	3260										
Misc	3290										
Airfare	3320										
Vehicle Rental	3220										
Contract Accounting Use Only:					Total Travel Cost Estimate:						
External Fund					10.0256			Total Advance Meals & Lodging:			

Airfare Flight Information:	
Full Name on Issued Government ID: _____	
Date of Birth: _____	Gender: _____ Email Address: _____
Airfare Confirmation: _____	
Airfare Confirmation Date: _____	PCard Type: _____ General Fund: _____ External 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.