

Travel Request Form Pcard Purchase

Date _____

Traveler _____
Name as it appears on your I.D.

Date of Birth _____

Travel Information

Domestic Travel

International Travel

Vendor _____ **or** attach a printed copy of the travel request from the vendor.

Frequent Flyer No. _____ Seating Preference Aisle Window

Departure Date and Time _____

Return Date and Time _____

Destination _____

Detailed Business Purpose _____

Emergency Contact: Name _____ Phone Number: _____

If any of the travel is personal, we must obtain a cost comparison showing that the price of your flight is equal to or less than the cost of the flight if you had only been at the destination during days of business. Please provide 3 lowest quotes for business travel dates from a site such as Expedia or Travelocity to document the cost of business travel.

If applicable, provide the dates of personal travel _____

Foreign Travel Policy: Travel to be charged to a Contract and Grant Account must be booked with a US Carrier. If applicable, the itinerary must note a "Code-sharing Agreement" with a US carrier for all connected flights. This must be clearly stated on the trip itinerary (ticket).

Signature _____ Index _____

*Approval from the individual responsible for the index provided.