

University Travel

Office of Business Affairs
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<http://www.mnsu.edu/busoff/travel/docs/>

CS1404 TRAVEL ADVANCE REQUEST - TIPS

Note:
 If you hold your cursor over these icons - an icon description will appear.

Hand Tool
 (default setting - so you can type into fields)

Text Selection
 (copy/paste dates, etc.)

Print

Zoom

Pages Navigation
 (first page, last page, etc.)

View Sizes

Find Text

Just click above desired line selection for check mark to appear

Just click on box for "x" mark to appear

You can navigate through the form by either using the tab key to go from field to field or just by clicking in the field you want to type in.

To zoom in (to increase the size of the text) select the Zoom tool (magnifying glass tool icon) and click anywhere on the document. Keep clicking for desired magnification. Or select a magnification size from the bottom left part of the document window.

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CS1404
 MINNESOTA STATE UNIVERSITY, MANKATO

TRAVEL ADVANCE REQUEST AND/OR PRIOR APPROVAL FOR OUT-OF-STATE TRAVEL AND/OR TO INCUR SPECIAL EXPENSES

TYPES OF REQUESTS

A. Travel Advance
 B. Out-of-State Travel (for all funding sources, excluding IFO contract money)
 C. International Travel (for all funding sources)
 D. Special Expenses - car rental, meals within a work area, meal costs over maximum reimbursement rates, conference and registration fees when over \$500.

TRIP DOCUMENTATION

Out-Of-State	Employee Name	Home Address	SSN	Employee ID
	Gary Employee	1 Infinite Loop, Mankato, MN 56001	123-44-5555	12345678
Department/Work Division	Department	Job Title	Usage	
Minnesota State University, Mankato	Office of Computers	Info Tech Specialist	555	

1. Describe the event, name of conference, list participants and why the state should fund (if possible, attach a brochure on the event):
 MacWorld Expo in New York City

2. Date(s) of travel 07/17/2001 - 07/20/2001 Date(s) of event 07/17/2001 - 07/20/2001

3. Location(s) of event New York City, NY

	Estimated Costs	Travel Advance
4. Registration fee (attach brochure)	\$ 800.00	\$ 800.00
5. Mode(s) of transportation:		
A) Airfare (POB) 555778	\$ 300.00	\$ 300.00
B) Car Rental (attach expl. why rental is necessary vs. public trans.)	\$ 125.00	\$ 125.00
C) Others (specify)	\$	\$
6. Lodging	\$	\$
7. Meals (description) (number of days 3 x daily rate 25 = \$75.00)	\$ 75.00	\$ 75.00
Which exceed maximum state allowance Within work area	\$	\$
8. Other (specify)	\$	\$
Total Estimated Costs	\$ 1,300.00	
Total Advance Request	\$ 1,300.00	

The above estimate reflects the overall cost of this trip. I acknowledge that I am aware of an automatic recapture of any unsettled travel advances.

Date Check Needed 07 / 06 / 2001

Employee Signature _____ Date 7/3/2001 Work Phone _____

FUNDING SOURCE(S) AND AUTHORIZATION

9. Support from Professional Development Contract Funds (conferences, workshops, meetings, training sessions, and seminars sponsored by others, including professional associations and governmental agencies). Cost Center # _____ \$ _____

10. Support from Administrative Travel Allocation (essential to the continuing operation of University programs and where business cannot be transacted by phone or correspondence (i.e. supervision of students/interns, attendance at required meetings)). Cost Center # 222222 \$ 1,300.00

11. Support from Other Accounts (i.e. Faculty Improvement Grants, Professional Improvement Funds, Research Grants, Foundation, Activity, etc.). Cost Center # _____ \$ _____

This authorizes the above travel and commits funds under my authorization to incur a travel advance and to pay the travel related expenses for this trip.

Department Chair/Unit Director/Supervisor _____ Date _____ Work Phone _____

College/Division Head _____ Date _____ Work Phone _____

FOR OFFICE OF BUSINESS AFFAIRS - ACCOUNTING USE ONLY

Quart %	FY	Fund	Agency	Org	SKG	Appr	Acct	SDM	Proj	Rpt Cat	Description/Cost Center	Department ID	Expense Group ID	Date
			E26	0071										
			E26	0071										

Customer ID	SSN	Name	Reference	GL Acct	GL Object	Account	Date Date
			95017	038009	8203		

Page # _____ Rev # _____ Date _____ May 2001

You can type in your SSN without dashes and it will put them in for you.

these fields are totaled by

Select if you want to clear the form and start over

Select if you want to Print the form or select File Menu; Print

If you have Adobe Acrobat (not Adobe Reader, the free version) you can select this and Save your text.

Form layout revision date

Click on this if to hide and unhide Bookmarks (the Travel Guidelines PDF has bookmarks, the CS1404 does not)

Select this pop-up menu to select different zoom values (12.5% to 1600%). This form is set to 150% zoom factor when you open it up.

Displays current page number out of total number of pages in document.

Displays the page size of document.

Questions about Adobe Reader or form functionality -

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