

**Date received in University Financial Service**

\*\*Must be 2 weeks prior to Date Advance Required\*\*

**TRAVEL ADVANCE REQUEST**

Deliver to UFS Director's Office for Approval – MCB260

**University Financial Service Use and Approval Only**

Date Requested \_\_\_\_\_

Applicant's Name \_\_\_\_\_

PSU ID \_\_\_\_\_

Email/phone \_\_\_\_\_

\*\*Advance Repayment Due Date \_\_\_\_\_

(must be within 60 days of last travel date)

Banner Doc # \_\_\_\_\_ Check # \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_

Title \_\_\_\_\_

**Charge Department Index Code** \_\_\_\_\_**If GRANT - RSP Approval**

Department \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Dept Contact \_\_\_\_\_

Print Name \_\_\_\_\_

Title \_\_\_\_\_

Email/Phone \_\_\_\_\_

Travel Advance Index-Acct	Advance Amount Requested (up to 80% of cash out of pocket expenses)	Dates of Travel Period	Date Advance Check Needed
TRA001-A3110			

**Business Purpose of Travel Advance – this is for individual travel only**

-- Attach a copy of your approved Travel Authorization Form to this Travel Advance Form --

--A copy of this request for advance is required to be attached to the final reimbursement request form. --

**Receipt is hereby acknowledged of an advance from PSU funds as follows:**

- A) I understand that this travel advance is not a loan and that these funds are to be used solely for the purpose of defraying reimbursable travel expenses while on state business.
- B) I understand that using the funds for any other purpose may be considered a financial irregularity. Oregon Revised Statute 293.26 states that "Except as otherwise specifically provided by law, the Secretary of State shall require all persons who have received any moneys or property belonging to the state and who have not accounted therefore to settle their accounts and to return the moneys or property to the state." If I fail to submit an approved reimbursement and/or repay any remaining portion of this advance within 60 days after the final date of travel, I understand and agree that the matter will be referred to the PSU Office of University Financial Services, that an account receivable will be created in my name, and that any and all legally permissible methods may be taken to recover the amount due, including the withholding of other amounts due to me by Portland State University (other than employee wages).
- C) In the event of my termination of employment with Portland State University, prior to repayment of this advance, I authorize the PSU Office of University Financial Services to endorse and sign on my behalf all checks and vouchers payable to me if it is necessary to reimburse Portland State University for any advances made to me through this revolving fund.
- D) It is my responsibility to safe keep this advance, and I assume responsibility for any loss incurred.
- E) If the applicant receives direct deposit for reimbursements, this advance will be automatically deposited into the account indicated on the ACH payment form.

Signature of Applicant	Department Head Approval	Advance Check Received by -OR- ACH - no 2nd signature required
Signature _____ Date _____	Signature _____ Date _____ Print Name _____ Title _____	Signature of Applicant _____ Date _____ <b>**Must be signed when check is received**</b>