

Travel Authorization ADDENDUM

SECTION I - Personal Data Employee Name: ______ TU ID# _____ E-Mail Address:_____ Extension: _____ Destination: Return Date: Has a Travel Expense Voucher been submitted for this trip? Yes No SECTION II – Source of Funding **Additional Funding Source:** 1) Primary Source: Dept or Grant: _____ Amount:____ Authorized Budget Signature Department Name Date 2) Second Source*: Dept or Grant: Amount: Authorized Budget Signature Department Date 3) Third Source*: Dept or Grant: _____ Amount:____ Authorized Budget Signature Department Date * Second and/or Third Source of Funds, if applicable SECTION III – Authorization/Verification Required Signatures – University Budget Office Signature Date (Required for budget verification if addendum amount exceeds \$400 or total cost of trip now exceeds \$1000 or if funded by a sponsored project)

Financial Services Signature

Date