COAPS TRAVEL REQUEST FORM

This form must be submitted **PRIOR** to travel. Please allow at least one month for a cash advance.

Traveler	r Date			
Destination (city, state, country) Departure Date Return Date	Depa	rture Time rn Time		
Gratis time? Yes No Beg Any funding from non-COAPS so		End No Amoun	t/Source	
Purpose & Justification				
Budget(s)/Project(s) Charged				
Estimated Travel Costs	Amo	unt	Payment Type	
Air Fare				
Lodging (\$225/night max.)				
Registration	_			
Car Rental (AVIS/Budget Preferre	ed)			
Other Transportation Meals/Per Diem				
 Total				
Meal Allowances (Domestic) A daily per diem rate of \$80 per day (reimbursed.	'\$20 per quarter)	in lieu of lodgin	g and meals expenses may be	
Breakfast - \$6.00 - when travel be Lunch - \$11.00 - when travel beg Dinner - \$19.00 - when travel beg	ins before 12:0	00 pm and exte	ends beyond 6:00 pm	
Request for Cash Advance?	Yes No	If Yes, Total A	mount	
Comments/Notes:				