

PURPOSE

This form may be used when booking University business travel through a travel agency if you wish to have the charges billed directly to the University. Please forward the completed and authorized form to the travel agency to authorize them to bill the University directly. All directly billed charges must still be reported on a Travel and Business Expense Claim in the 'Detailed Purpose/Notes' field.

Requestor Name	Department Name
-----------------------	------------------------

TRAVEL DETAILS		
<u>Trip Purpose:</u>	<u>Trip Start (dd-mmm-yyyy):</u>	
<u>Destination(s):</u>	<u>Trip End (dd-mmm-yyyy):</u>	
<u>List all Traveller Names:</u>	<u>Types of Expense (Flight, Hotel, etc.):</u>	
	<table border="1" style="width:100%"> <tr> <td style="width:50%"><u>Amount Authorized:</u></td> <td style="width:50%"><u>Total Actual Cost:</u></td> </tr> </table>	<u>Amount Authorized:</u>
<u>Amount Authorized:</u>	<u>Total Actual Cost:</u>	
Please attach detailed quote if available.	If the total actual cost exceeds the amount authorized, further approval will be required to pay invoice.	

UNIVERSITY OF GUELPH CHARGE CODE						
Item	Fund (3)	Unit (6)	Grant (6)	Project (6)	Object (5)	Amount
Airfare					62407	
Accommodation					62406	

TRI-COUNCIL:

Please check if travel is to be charged to a Tri-Council Grant (NSERC, SSHRC, CIHR, CRC, NCE) and ensure that the principal researcher or their authorized delegate has signed to authorize the charges.

AUTHORIZATION	
Each of the undersigned certifies that all expenses related to this travel procurement are incurred for University business purposes and are in accordance with University policies.	
Signature of Principal Traveller or Sponsor	Print Name:
	Date:
Chair /Supervisor Approval	Print Name:
	Date:
Dean/ Director Approval (if total cost exceeds \$10,000)	Print Name:
	Date:

Completed by:		Contact Phone #	
----------------------	--	------------------------	--

Travel Agency Name:		Invoice Number:	
----------------------------	--	------------------------	--