FACULTY TRAVEL REPORT

This form to be used when utilizing funds set aside for professional travel by faculty.

(For Travel Policy go to: accounting.owu.edu/travelandexpensepolicy.html)

Name: ____________________________
ID#: _____________________________
Department: _______________________

(For Office Use Only)
JV______ PC______ DATE __________

Dates of Attendance __________________ Place __________________________
Sponsoring Organization _________________________________________________
If part of the program, state subject or function ___________________________ 
Highlights and benefits to you personally _________________________________

____________________________________________________________________
____________________________________________________________________
Results to be shared with the faculty, administration, curriculum committee, or others __________

____________________________________________________________________

SIGNATURE ____________________________
CHAIR ______________________________

ALLOWANCE SUMMARY

Expenses $ __________
Advance (If Any) $ __________
Paid from Cashier $ __________

DO NOT WRITE BELOW THIS LINE

Accounting Information:

Debit 10-0000-2013-032_ _ $___________ Credit 10-0000-1254-00000 $ __________

OR

Debit 10-0000-2012-00000 $___________ Credit 10-0000-1225-00000 $ __________

COPIES TO: Accounting Office - White
Accounting Alpha File - Yellow
Your Copy - Pink

5/2013