



**MIAMI DADE COLLEGE**  
**TRAVEL ADVANCE AND EXPENSES FOR STUDENT SERVICES MONIES**

**PART A REQUEST FOR ADVANCE** (After approval, submit to Accounts Payable with an approved Disbursement Request Number)

1. I request a travel advance in the amount of \$ \_\_\_\_\_, estimated expenses for a Student Services Sponsored event to be held at \_\_\_\_\_

on \_\_\_\_\_  
 Months Days Year

This request is on behalf of \_\_\_\_\_ faculty members and \_\_\_\_\_ students

Estimated Departure: Time: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Return: Time: \_\_\_\_\_ Date: \_\_\_\_\_

2. Estimated Expenses:

A. Faculty / Student Meals: Breakfasts \_\_\_\_\_ @ \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
 Lunch \_\_\_\_\_ @ \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
 Dinner \_\_\_\_\_ @ \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
 Postgame meal \_\_\_\_\_ @ \$ \_\_\_\_\_ = \$ \_\_\_\_\_

TOTALS \$ \_\_\_\_\_

B. Other Expenses: Transportation \$ \_\_\_\_\_  
 Lodging \$ \_\_\_\_\_  
 Fees \$ \_\_\_\_\_  
 Misc. \$ \_\_\_\_\_

TOTALS \$ \_\_\_\_\_

C. Total of estimated expenses (Lines A+B) ----- \$ \_\_\_\_\_

Requestor \_\_\_\_\_  
 Date \_\_\_\_\_

Approved \_\_\_\_\_  
 Dean of Adm./ Student Services Date \_\_\_\_\_

Approved \_\_\_\_\_  
 Director of Student Life Date \_\_\_\_\_

Approved \_\_\_\_\_  
 Campus President (signature) Date \_\_\_\_\_

ACCOUNT NUMBERS: A) Advance \_\_\_\_\_

B) Expense \_\_\_\_\_

**PART B ACCOUNTING OF MONIES ADVANCED** (Complete upon return and submit to Accounts Payable)

Departure date and time \_\_\_\_\_ Return date and time \_\_\_\_\_

1. Check issued to: \_\_\_\_\_ S.S. No.: \_\_\_\_\_  
 (type or print)

Check No.: \_\_\_\_\_ Check Date: \_\_\_\_\_ Check Amount \$: \_\_\_\_\_

2. Transportation: a. Automobile \$ \_\_\_\_\_ (.445 cents per mile)  
 b. Bus \$ \_\_\_\_\_  
 c. Air \$ \_\_\_\_\_  
 d. Train \$ \_\_\_\_\_ TOTAL \$ \_\_\_\_\_

3. Lodging (Receipts attached) ----- TOTAL \$ \_\_\_\_\_

4. Meals (Form FM - A - 2A attached) ----- TOTAL \$ \_\_\_\_\_

5. Other expenses: a. Taxi \$ \_\_\_\_\_  
 (Receipts as b. Fees \$ \_\_\_\_\_  
 required) c. Misc. \$ \_\_\_\_\_ TOTAL \$ \_\_\_\_\_

6. Total amount expended (Lines 2+3+4+5) ----- \$ \_\_\_\_\_

7. Balance (due to) (returned by) recipient (line 1 minus 6) \$ \_\_\_\_\_

8. Disposition of balance (Line 7):  
 a. Balance due recipient, Disbursement Request No. \_\_\_\_\_ Date \_\_\_\_\_  
 b. Balance returned by recipient, receipt No. \_\_\_\_\_ Date \_\_\_\_\_

I hereby certify or affirm that this statement of travel advance and expenses is true and correct in every material matter; that the expenses were actually incurred and necessary travel expenses in the performance of official duties.

\_\_\_\_\_  
 Signature of recipient of advance Date

**APPROVED:** \_\_\_\_\_  
 Signature of Business Affairs Officer

\_\_\_\_\_  
 Campus Department / Division