

ARKANSAS TECH UNIVERSITY Travel Services 203 West O Street Russellville, AR 72801-2222

479-356-2034 479-964-0583 ext. 3503 travel@atu.edu

Agency TCard Order Request Form

Please complete and sign this form to request use of the ATU Travel card for arrangements purchased with Agency Funds. This form is used **only** to request agency funds be used when booking travel arrangements. If departmental budgets are being used to purchase or reimburse for travel expenses, a requisition must be entered prior to travel and this form is not to be used.

Agency Information						
Agency Name:						
Advisor Name:						
Advisor Email:						
Fund to be used for payment of this request.						
Fund		Account				
			240200			
Vendor Information						
Name:						
Contact Person:						
Website:						
Telephone Number	er:					
Email Address:						
Ту	pe of arrangemen	ts or service ro	equested.			
Rental Vehicl	e	Airfare	_			
Lodging Other						
Entertainment Tickets						
Description of arrangement or service		ice	<u>Qty:</u>	Price:		

Signature of Requestor	Date
Signature of Faculty Advisor or other registered signatory	Date

Signature of Faculty Advisor or other registered signatory

Date

This space for Travel Services and Accounting Dept. use only.			
Amount Journal Entry Adjustment:			
Reason for Adjustment:			
Travel Services Approval:Accounting Approval:			