



**Travel Authorization *ADDENDUM***

**SECTION I - Personal Data**

Employee Name: _____	TU ID# _____
Department: _____	
E-Mail Address : _____	Extension: _____
Destination: _____	Return Date: _____
Has a Travel Expense Voucher been submitted for this trip? <input type="checkbox"/> Yes <input type="checkbox"/> No	

**SECTION II – Source of Funding**

<b>Additional Funding Source:</b>		
1) <b>Primary</b> Source:	Dept or Grant: _____	Amount: _____
_____	_____	_____
Authorized Budget Signature	Department Name	Date
2) <b>Second</b> Source*:	Dept or Grant: _____	Amount: _____
_____	_____	_____
Authorized Budget Signature	Department	Date
3) <b>Third</b> Source*:	Dept or Grant: _____	Amount: _____
_____	_____	_____
Authorized Budget Signature	Department	Date
* Second and/or Third Source of Funds, if applicable		

**SECTION III – Authorization/Verification**

<b>Required Signatures –</b>	
_____	_____
University Budget Office Signature	Date
(Required for budget verification if addendum amount exceeds \$400 or total cost of trip now exceeds \$1000 or if funded by a sponsored project)	
_____	_____
Financial Services Signature	Date

*Traveler will receive a copy of processed form.*