TRAVEL ADVANCE REQUEST

1. NAME *(Last, First, MI)*	2. GRADE	3. SSN

4a. MAILING ADDRESS	b. CITY	c. STATE	d. ZIP

5. UNIT	6. TRAVEL ORDER #	7. DATE OF ORDERS

NOTE: All Military E-7 and above or Civilian GS-8 and above and any personnel who perform TDY at least 2 times per year are required to have the Government American Express Card and are therefore ineligible for TDY Advances

			FINANCE USE ONLY
8. Is this advance for a DITY move? ☐ YES ☐ NO *If YES, skip to #16*			
9. Do you have the Government American Express Card? ☐ YES ☐ NO			
10. What mode of travel will you utilize? ☐ POV ☐ Government/Official Travel			
11. How much will you pay per night for lodging?	# of nights:	Cost per night	
12. Rate and Cost of Rental Car (Leave blank if none) ☐ DAILY ☐ WEEKLY ☐ MONTHLY			
13. Will you incur any miscellaneous expenses (i.e. Registration Fee, Passport Fee) ☐ YES ☐ NO If YES, list expense(s) and amount(s): _____			
14. Are you taking leave in conjunction with TDY? ☐ YES ☐ NO	From/To dates	/	
15. Do you have a Statement of Nonavailability (SNA/CNA) ☐ YES ☐ NO If YES, provide control # or attach one copy to your orders		Control #	

PENALTY STATEMENT

There are severe criminal and civil penalties for knowingly submitting a false, fictitious or fraudulent claim. (U.S. Code, Title 18, Sections 287 and 1001 and title 31, Section 3729)

CERTIFICATION

I hereby understand that this advance must be settled in the form of a travel settlement once travel is completed. If a travel settlement is not submitted within 15 days upon completion of travel, this advance and a $15.00 administrative fee will be automatically deducted from my next regular pay. If I do not perform the travel, the advance is to be returned to the disbursing office that issued the advance within seven days.

16. SIGNATURE	17. DATE	18. DAYTIME PHONE

Finance Use Only

Meals Authorized: ☐ Deductible ☐ Government ☐ PPD ☐ Commercial GTR RATE:

REMARKS:

ADVANCE IS ☐ APPROVED ☐ DENIED *If* **DENIED**, *State Reason:* _____

ADVANCE APPROVED FOR THE AMOUNT OF: $ _____ INITIALS OF APPROVING OFFICIAL: _____

PRIVACY ACT STATEMENT

AUTHORITY: 5 USC 5701, 37 USC 404-427, EO 9397. PRINCIPAL PURPOSE: To provide a basis for establishing individual's travel entitlements and to provide a history of travel entitlements and travel transactions . ROUTINE USES: Information may be released to Treasury Department, Social Security Administration, Veterans Administration and to those states and cities which have an agreement with DA to verify tax liability against member's state and city income tax returns. DISCLOSURE: Voluntary. However, failure to furnish information requested will likely result in partial or total denial of request.