

SPEND AUTHORIZATION ATTACHMENT

AS292-A

This form is a required attachment to the Spend Authorization only if any of the three criteria below applies:

Traveler Information			
Traveler		Title	
Employee	Employee	Student Employee	LSU Graduate Student
Non-Employee	Guest Participant	Interviewee LSU Undergraduate Student	Contract Vendor LSU Graduate Student
Contact		Phone	E-mail

Business Travel	
Departure Date	Return Date
Destination (City, State and/or Country is required) From: _____ To: _____	
Purpose of Travel:	

1. Personal Travel Dates/Destination	
€ Does travel include personal travel days?	Yes No
- If yes, please disclose the personal travel destination(s). Travel cost may be limited to the lesser of a lowest logical airfare or a prorated amount. (See PM-13)	

2. Foreign Travel – US Department of State Travel Advisory	
(Applies to all travel outside the 50 United States, District of Columbia, Puerto Rico, US Virgin Islands, American Samoa, & Guam)	
€ Is there a US Department of State Travel Advisory for the destination?	Yes No
- If yes, complete additional required forms per the High Risk Travel procedures for your campus.	
- If yes, the High Risk Travel forms must be approved and attached to the Spend Authorization prior to submission.	

3. Travel Greater than 30 days	
€ Is the travel greater than 30 days at one business location?	Yes No
- If yes, the Cost Center Manager must add the appropriate Ad Hoc Approvals listed in PM-13, Appendix B.	