



RESEARCH CORPORATION OF THE UNIVERSITY OF GUAM

TRAVEL ADJUSTMENT

Date: _____

To: RCUOG Chief Business Officer

Via: _____, _____, _____ Approve Disapprove
UOG Dean/Director Signature Date

From: _____, _____, _____ Approve Disapprove
Principal Investigator Signature Date

Subject: Amendments to RC Travel Authorization and Request

The following are amendments to:

Travel Authorization Number: []

Estimated Cost of Travel:

Table with 3 columns: Type of Adjustment, From:, To: and rows for Transportation, Per diem, Auto Rental, Miscellaneous (list), Total, Travel Advance Requested.

Justification/Reason: _____

_____, _____
Traveler's Signature Date

G.L. Account Number: _____

_____, _____
RCUOG Certifying Officer's Signature Date