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|  | | | | | | | | | | **Travel Authority and Advance**  **Autorisation de voyager et avance** | | | | | | | | | | | | | | | | |
| **NOTE: Please refer to page 2 for further information on numbered items. NOTA: Instructions à la page 2 pour les cases numérotées.** | | | | | | | | | | **14 A** | | 1. Travel authority no. (TAN) No d'aut. de voyager (NAV) | | | | | | 1. Document no. - No du document | | | | | | | | |
|  | Original  Prem. demande | |  | Amended (Same levels of approval as orig., dated  Modification (approbation par des agents du même niveau que pour la première demande, datée du | | |  | | | **Type**  **2** | | Name of traveller - Nom du voyageur  «full\_name» | | | | | | | | | | | | 1. Classification | | |
| **Part A /Partie A** | | | | | | | | | |  | | | | | | | | | | | | | | | | |
| Department - Ministère | | | | | | Branch/Division/Group - Direction/Division/Groupe | | | | | | | | | | | | | | | | | | | | |
| Privy Council Office | | | | | | Prime Minister's Office - Advance | | | | | | | | | | | | | | | | | | | | |
| Address - Adresse | | | | | | Telephone No. - No de téléphone | | | | | | | | 1. If different address, send cheque to: Si adresse différente, envoyer chèque à: | | | | | | | | | | | | |
| 56 Sparks St. 1st Floor | | | | | | 613-762-2158 | | | | | | | |  | | | | | | | | | | | | |
| 1. Branch contact - Personne ressource à la direction | | | | | | Telephone No. - No de téléphone | | | | | | | | DIRECT DEPOSIT | | | | | | | | | | | | |
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| 1. Purpose of travel - Objet du voyage | | | | | | | | | | | | | | No. of days  Nbre de jours | | Do you have a Government Individual Travel Card (ITC)?  Avez-vous une carte de voyage pers. du gouvernement (CVP)? | | | | | If no, would you like to request one? Le cas échéant, aimeriez-vous en avoir une? | | | | | |
|  | | | | | | | | | | | | | |  | |  | Yes  Oui | |  | No  Non |  | Yes  Oui | | |  | No  Non |
| **Part B - Travel Itinerary / Partie B - Itinéraire** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date  No. of meals prepaid Nbre de repas pré. | | From | | | To | | | Time  Heure | | | Transportation  Transport | | | |  | Accommodation | | | | | | | 1. File locator number | | | |
| M D-J | | De | | | À | | | Departure Départ | Arrival Arrivée | | 1. Mode | | 1. Class Classe | |  | Hébergement | | | | | | | No de repérage  du dossier | | | |

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| **Part C - Expenses and Allowances / Partie C - Dépenses et indemnités** | | | | | | | | | |
| Standard - Générales | | | | | | 1. Non-standard - Spéciales | | | 1. Justification of non-standard items, including personal travel |
| Item  Type de dépense | | | | Estimated cost  Coût estimatif | | Item  Type de dépense | Estimated cost  Coût estimatif | | Justification des dépenses spéciales, y compris les voyages à  titre personnel. |
| Accommodation (e.g. white-page hotel)  Hébergement (p. ex.: un des hôtels figurant dans la partie blanche du répertoire) | | | | $ |  | Accommodation (e.g. green-page hotel)  Hébergement (p. ex.: un des hôtels figurant dans la partie verte du répertoire) | $ |  |  |
| Compact car rental (collision damage waiver mandatory)  Location d'une voiture compacte (assurance-  collision sans franchise obligatoire) | | | | $ |  | Non-compact car rental (collision damage waiver mandatory)  Location d'une voiture non compacte (assurance collision sans franchise oblig.) | $ |  |  |
| Private vehicle requested by:  Voiture particulière demandée par: | | | |  | | Other (specify) - Autre (préciser) |  | |  |
|  | traveller  voyageur |  | employer  employeur | $ |  |  | $ |  |  |

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| **Part D - Partie D** | | | | | | | |
| 1. ESTIMATED COST - COÛT ESTIMATIF | | | | | | | |
| Prepaid - Prépayé | | Other - Autre | | | Trip total  Coût total du voyage | | |
| $ | | $ | | | $ | | |
| Funding - Financement | | | | | | | |
| A) Travellers cheques  Chèques de voyage | | | | B) (13) Other advance  Autre avance | | | |
| Cdn $ Can $ |  | |  | Cheque $ Chèque $ | |  |  |
| US $ É.-U. $ |  | |  | Cash $ Comptant $ | |  |  |
|  | | | |  | | | |
| Other $ Autre $ |  | |  | Total funding requested (A + B)  Financement total demandé (A + B) | | | |
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| Public Liability and Property Damage min. $1 million. Deductibles NOT reimbursable.  Responsabilité civile et dommages matériels (min. 1 000 000 $.) Les franchises NE SONT PAS remboursables. | | | | | | | |  | | Upgraded transportation  (specify in "Class" above)  Transport à tarif supérieur  (préciser la «classe» ci-dessus) | | | | | | | | | | | | $ |  | | |
| Transportation  Transport | | | | | | | | $ |  |  | | | First class (Deputy Head or equivalent approval)  Prem. classe (approuvée par le sous-chef ou l'équiv.) | | | | | | | | | | | | |
| Meals and incidentals  Repas et frais accessoires | | | | | | | | $ |  |  | | | Business class/Other-Upgrated (other than article 3.1.9, Assistant Deputy Head or equivalent approval)  Classe d'affaires - ou autre classe à tarif supérieur (approuvée par le sous-chef adjoint ou l'équiv. s'il s'agit d'une classe non prévue à l'article 3.1.9) | | | | | | | | | | | | |
| Other (specify) - Autre (préciser) | | | | | | | | $ |  |  |  | | | | | | | | | | | | | |  |
|  | | | | | | | |  | |  | Approval - Approbation | | | | | | | | | | | | | |  |
| **Part E - Traveller / Partie E - Voyageur** | | | | | | | | | | | | | | | | | | | | | | | | | |
| I have access to the Treasury Board Travel Policy (Internal policy for separate employers) and accept the terms and conditions of travel that are in accordance with current policy.  J'ai accès à un exemplaire de la politique du Conseil du Trésor sur les voyages (Politiques interne pour les employeurs distincts) et en accepte les conditions. | | | | | | | | | | | | | | | | | | | 1. Ticket pick-up date and location Date et lieu de la collecte des billets | | | | | | |
|  |  | | | | | | | | | | |  | |  | | | |  |  | | | | | | |
|  | Signature | | | | | | | | | | |  | | Date | | | |  |  | | | | | | |
| Recommended by (signature) - Recommandé par (signature) | | | | | | | | | | | | | | | Date | | | | | Approved by (signature) - Approuvé par (signature) | | | | | | | | | | | | Date | |
|  | | | | | | | | | | | | | | |  | | | | |  | | | | | | | | | | | |  | |
| **Part F - Request for Advance / Partie F - Demande d’avance** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Type  Y-A M D-J | | Particulars (stub information) - Détails (talon) | | | | | | | | | | | | | | | | | | | | | | Cheque amount Montant du chèque | | | | | | Date cheque required Chèque demandé pour le | | | |
| 3 | |  | | | | | | | | | | | | | | | | | | | | | | $ | | | | | |  | | | |
| **Payment Record / Enregistrement du paiement** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Type | | | | 1. Sub-type Sous-type | | | 1. P.R.I. - C.I.D.P. | | | | | | | | | 1. Amount - Montant | | | | | 1. Req. no. No de la demande | | | | | | 1. Supplier indicator Code | | | 1. Due date - Date déchéance   Y-A M D-J | | | |
| 7 | | | | **8 0** | | |  | | | | | | | | |  | | | | |  | | | | | | Indicateur du  fournisseur | | 0 |  | | | |
| Type 4 | | | | | | | | **Accounting Information / Renseignements comptables** | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. Sub-type Sous-type | | | Vendor code Code du fourn. | | | 1. Departmental ref. no. No de réf. du ministère | | | | 1. Coding - Codification | | | | | | | | | | | | | | | | | | | | | 1. Amount - Montant | | |
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|  | | | | | 1. Description | | | | | | | | | | | | | | | | | | | | | | | 1. Financial encumberance no. No de consignation de fonds | | | | | |
|  | | | | |  | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| Department pre-audit and account verification (signature)  Agent. min. chargé de la vér. préalable des comptes (signature) | | | | | | | | | | | | | | Requisitioned for payment pursuant to section 33 of the Financial Administration Act and certified in accordance with section 7 of the Payment Requisitioning Regulations.  Demandé pour paiement conformément à l'article 33 de la Loi sur la gestion des finances publiques et certifié aux termes de l'article 7 du Règlement sur les réquisitions de paiements. | | | | | | | | | | | | | | 1. Cheque No. - No du chèque | | | | | 1. Date |
| Verified correct (SSC) (signature)  Vérifié conforme (ASC) (signature) | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | |  |
| Services officer (SSC) (signature)  Agent responsable (ASC) (signature) | | | | | | | | | | | | | |  | | |  | | | | | | | | | |  |  | | | | |  |
|  | | | | | | | | | | | | | |  | | | Signature | | | | | | | | | |  |  | | | | |  |
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