

### United Nations - Nations Unies TRAVEL AUTHORIZATION

1. ADMIN OFFICER/ASST. Room No. _____ Ext. _____	This is to authorize the traveller(s) to undertake the travel described below in accordance with the itinerary and authorized entitlements	2. AUTHORIZATION NO YEAR   TYPE   SERIAL NUMBER
3. NAME AND INDEX NO.	4. TITLE AND GRADE	5. NATIONALITY
		6. OFFICIAL DUTY STATION

7. NAME OF ACCOMPANYING DEPENDANTS	RELATIONSHIP	BIRTHDATES OF CHILDREN		
		DAY	MO.	YEAR

8. Traveller to be contacted at:  
Room No. \_\_\_\_\_ Ext. \_\_\_\_\_  
Home Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone No. \_\_\_\_\_

9. PURPOSE OF TRAVEL (If Home Leave, Family Visit or Education Grant, indicate city of entitlement):

10. AUTHORIZED BAGGAGE & EFFECTS  
Traveller must pay all costs in excess of entitlements given below:  
**ACCOMPANIED EXCESS BAGGAGE**  
Air: \_\_\_\_\_  
UNACCOMPANIED SHIPMENTS  
Surface-Volume: \_\_\_\_\_  
and/or Weight: \_\_\_\_\_  
OR Air Freight-Weight \_\_\_\_\_  
**INSURANCE COVERAGE (Unaccompanied shipments only):** Maximum entitlement is: \_\_\_\_\_  
US\$ value: \_\_\_\_\_  
The traveller must submit an itemized and valued inventory for this purpose and list articles of special value separately. If inventory includes items of special value or exceeds entitlement, traveller must submit a signed statement agreeing to pay the extra premium in order to obtain full coverage.  
NOTE: Shipments in connection with home leave, family visits or education grant travel are not insured by the United Nations.

11. ITINERARY, MODE(S) OF TRAVEL AND STANDARDS OF ACCOMMODATION (by Air Economy Class unless otherwise indicated):  
N.B.-Connecting points or rest stopovers, if any, should not be included in 11(a).  
Itinerary authorized: (Departure Date \_\_\_\_\_ Return Date \_\_\_\_\_)

b) Itinerary requested by Traveller: (Departure Date \_\_\_\_\_ Return Date \_\_\_\_\_)

12. SPECIAL INSTRUCTIONS

14. TO: TRAVEL AGENCY: It is requested that you procure, for the account of the United Nations, tickets and reservations for the above travel, subject to the following (EXCURSION FARES SHOULD BE USED WHENEVER FEASIBLE).

13. TRAVEL ADVANCE AUTHORIZED: \$ \_\_\_\_\_  
Includes amount requested by travellers for excess baggage: Yes  No

Signature of Authorizing Officer \_\_\_\_\_ Date \_\_\_\_\_

15. Certifying Officer:  
Signature: \_\_\_\_\_  
Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Date: \_\_\_\_\_ Dept. \_\_\_\_\_

**IMPORTANT: Upon completion of the journey all receipts for transportation and excess baggage, any unused transportation tickets, and stubs of used tickets together with original copy of the travel authorization MUST be returned to the United Nations, attached to the Travel Claim (F.10). Failure to comply may result in debiting any outstanding charges to the traveller's account. The cost of any deviations from the authorized itinerary and standard(s) of accommodation will be borne by the traveller. If the standard(s) of accommodation actually used is lower than the standard to which the traveller is entitled, calculation of the cost to the United Nations shall be based on the lower standard.**

BAC: \_\_\_\_\_

**FOR USE BY EXECUTIVE OFFICES and ACCOUNTS DIVISION**

17. FOR USE BY TRAVEL AGENCY						
SALES RECEIPT NO	STAGES OF JOURNEY		CARRIER	DATE	COST	PLACE OF ISSUE
	FROM	TO				

18. ESTIMATED COSTS TO THE U.N.	
1. Excess baggage	_____
2. Household & P.E.	_____
3. Terminal	_____
4. Transit	_____
5. Subsistence	_____
6. Miscellaneous	_____
7. Transportation	_____
<b>ESTIMATED TOTAL</b>	_____

**NOTE: Estimates are for internal purposes only and do not necessarily represent the amounts to which the traveller is entitled.**

19. OBLIGATION RECORDING DATE

**RECORD OF TRAVEL ADVANCES**

DATE	U.N. OFFICE	CUR RENCY	AMOUNT	EXCHANGE RATE TO U.S. \$	ADVANCE IN U.S. \$	VOUCHER NO. AND O.V	SIGNATURE OF PAYING OFFICER

**USE THE FOLLOWING SPACE FOR ANY ADDITIONAL OR EXPLANATORY INFORMATION,  
INCLUDING FULL INFORMATION AS TO UNUSED TICKETS, REFUNDS, ETC.**
