# SOCIOLOGY
# DIRECT BILL ID REQUEST FORM

Please use this form to request a Direct Bill ID to purchase
business-related airfare on University funds.

**Requestor Name:** _____     **Request Date:** _____

**Requestor Email:** _____

| | |
|---|---|
| **TRAVELER Name (Last Name, First MI):** <br> As it will appear on the airline ticket. | |
| **UCB Employee?   Yes          No** | **Employee ID** |
| **Departure City, State (Country if international):** | |
| **Final Destination City, State (Country if international):** <br> For visitors to campus, the final destination should be Berkeley, CA. <br> If trip has more than one flight destination before commencing the return trip, use the city of the last leg of the trip as the final destination city. For example, if you are flying from Oakland to Chicago and then to Dallas before returning to Oakland, the final destination is Dallas. | |
| **Planned Departure Date:** | **Planned Return Date:** |
| **Detailed business purpose for trip (*REQUIRED*):** | |

Account Name/Fund Source: _____

Chartstring: _____

I certify that the above is a true statement, that the expenses claimed were incurred by me on official University business, and that I have attached original receipts for each expense, as required by University policy.

Requestor signature: _____     Date: _____

Department approval: _____     Date: _____

*For Administrative Office Use ONLY for Exceptional Approvals:*

*Chair approval:* _____     *Date:* _____

*Dean approval:* _____     *Date:* _____