



## FOREIGN TRAVELER CONFIDENTIAL TRAVEL VENDOR REQUEST

This form is used to establish new travelers in the financial system (DELPHI), E-Travel System and provide information for disbursement of travel funds

### HEADER SUMMARY

GOVERNMENT AGENCY

Does the Nation that the traveler resides accept US checks?

Is there a charge for wire transfer or US check fees?

### TRAVELER/SUPPLIER HEADER INFORMATION IN THE FINANCIAL SYSTEM (DELPHI)

Is this a **REVISION** to an existing E2 user/traveler's supplier information?

Government Contractors- Select Invitational

HEADER TYPE:

\* If this is a **REVISION** to an existing E2 user/traveler choose "YES". The answer is 'NO' if this is for a **NEW** Request/Account. .

Supplier Number/ E2  
Employee ID

SSN/TIN:

**Note: SSN/TIN not  
needed if you do not have  
a United States social  
security number**

\* Leave Supplier Number/E2 Employee ID field blank if this is a **NEW** request.

If this is a **Revision/Modify Existing** Delphi supplier site OR a **Second DOT E2 profile** this is a required field. Find the Employee ID in your E2 personal profile

TRAVELER/SUPPLIER NAME:

*Must be full legal name*

\* Traveler/Supplier Name must be in ALL CAPS (LAST, FIRST MI ex: DOE, JANE M

SAM EXCEPTION

REASON:

\* The SAM Exception Reason is a required field for all requests and should read Employee/Invitational

### SITE LEVEL INFORMATION

SITE STATUS:

SITE NAME:

\* If Revision to Supplier is Yes, select Modify Existng, otherwise select NEW

\* SITE NAME:Select 'HOME' if you are a GOV.EMPLOYEE or  
Select 'INVT' if you are not.

COUNTRY:

ADDRESS 1:

ADDRESS 2:

ADDRESS 3:

CITY:

FOREIGN ZIP CODE:

**E2 New User Request**

Traveler Preparer's Gov Email Address

Minor Customer

Routing Template

E2 Approvers Gov. Email Address

E2 Approvers Digital Signature

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## PAYMENT TAB

Invitational Foreign Travelers who are not residents of the United States (US) and do not have a US Bank Account should [Select Foreign:Check/ No Check Waiver or Foreign Wire Transfer](#)

PAYMENT METHOD:

BANK NAME:

ROUTING NUMBER:

\* Routing Number is 9 digits

ACCOUNT NUMBER:

IBAN:

SWIFT CODE:/BIC:

SORT CODE:

CLABE/RUN (if applicable)

Bank Address 1

Bank Address 2

Bank Address 3

Bank Address 4

Bank Contact

Bank Phone Number

### INTERNATIONAL PHONE NUMBER FORMATS AROUND THE WORLD

Format: +1 AAA NXX-XXXX | Example: + 1 123 456-7890

Format: +44 AAA NXX-XXXX | Example: + 44 20 1234 5678

Format: +61 AA NNNN-NNNN | Example: + 61 2 1234 5678

Format: +39 AA NNNN NNNN | Example: + 39 02 1234 5678

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File has SPII information. • When emailing a form that has SPII, it must be encrypted per FIPS 140-2 using approved encryption program. • The SecureZip application will be used to encrypt the file. • If you do not have this application, use your agency encryption software to encrypt the form before emailing to the supplier team. THIS FORM CONTAINS SPII AND MUST BE ENCRYPTED WITH A SPECIFIC PASSWORD BEFORE SUBMITTING TO  
**9-AFN-AMC-Foreign-Traveler-Request@FAA.GOV**

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**PLEASE E-MAIL 9-AFN-AMC-Foreign-Traveler-Request@FAA.GOV TO OBTAIN THE PASSWORD PRIOR TO SUBMISSION**

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**PRIVACY ACT STATEMENT:** This statement is provided pursuant to the Privacy Act of 1974, 5 USC § 552a.

**AUTHORITY:** 31 CFR Part 209 and/or Part 210 authorizes DOT/FAA to collect this information.

**PURPOSE:** DOT/FAA will use this information to process payments from the Department of the Treasury to the financial institution and/or its agent.

**ROUTINE USE(S):** The information provided may be disclosed in accordance with the system of record notice DOT/ALL 7 -Departmental Accounting and Financial Information System (DAFIS) and Delphi Accounting System - 65 FR 19481 - April 11, 2000 and the "Blanket Routine Uses" that are available at the beginning of DOT's Compilation of Systems of Record Notices located at: <https://www.transportation.gov/individuals/privacy/privacy-act-system-records-notices>

**DISCLOSURE:** Provision of the requested information is Mandatory in accordance with 31 CFR Part 209 and Part 210; failure to provide the requested information will affect the processing of payment.

## HOW TO ENCRYPT A FILE

1. Open the form and fill out all required information.
2. Save the file to your desktop or other location.
3. Right click on file to encrypt.
4. Select SecureZIP.
5. Select Add To New Archive
6. Rename to vendor name on the form if desired to have unique name.
7. Click Save. Make sure it is in the location that is desired
8. Passphrase: Enter in the standard required passphrase (Passphrase will be emailed to user)  
Please contact [9-AFN-AMC-Foreign-Traveler-Request@FAA.GOV](mailto:9-AFN-AMC-Foreign-Traveler-Request@FAA.GOV) for passphrase if you don't have it.
9. Confirm passphrase: Enter same passphrase a second time
10. Click OK
11. Enter in PIN and click OK. • Enter PIN a second time and click OK
12. The zip file is created and ready to be emailed to the supplier team.
13. Right click on the zip file just created.
14. Select Send to.
15. Select Mail recipient.
16. Outlook will create a file and add the required attachment.
17. The email address to send the attachment is: [9-AFN-AMC-Foreign-Traveler-Request@FAA.GOV](mailto:9-AFN-AMC-Foreign-Traveler-Request@FAA.GOV).
18. Type in special instruction in the body of the email if required.
19. Click Send and it will email the attachment to the Foreign Traveler team for processing