

Travel Training Guide 2013



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UNIVERSITY OF ALASKA FAIRBANKS

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Travel

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UAF Finance & Accounting: Travel Office



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**Questions
or Comments?**
Make Suggestions Here!

Brittany Hooch - 12 February 2013, Tuesday 16:29

http://www.uaf.edu/finserv/travel/



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New Regulations

Familiarize yourself with the Travel Regulations based on the Board of Regent's policy via this link.

The regulations are displayed in an outline format.

Using the table of contents to find the area of interest makes navigation to the topic a simple task.

[Regulations Table of Contents for Travel](#)

University Regulations

R.05.02.060 Travel and Relocation

A. Travel/2. Definitions

i. *Travel Authorization form (TA) – the official approval form designated for documentation of all costs associated with a specific trip to meet federal income tax, and internal reporting requirements, encumbrance of funds, and approval of related advances.*

The traveler agrees, by signature, to abide by the University Regulations. The appropriate supervisor's signature is also required.

Projected out of pocket expenses incurred by the traveler will be encumbered via FGAENCB using the unique number printed on the Travel Authorization (TA) form. The actual expenses will be reimbursed to the traveler upon completion of a Travel Expense Report (TER).

The TA must be completed and signed by the supervisor and the traveler prior to purchases, encumbrance of funds, and travel dates.

The following slides will instruct how to complete each section of the TA according to University Regulations.

TA No.

UNIVERSITY OF ALASKA
TRAVEL AUTHORIZATION

Reset

Traveler's Name:

Department Name:

UA ID:

Travel Coord/Phone #:

Employee ☐ Non Employee ☐ Student ☐ Volunteer ☐

ARE YOU A CITIZEN OR PERMANENT RESIDENT? ☐ No ☐ Yes
If you are not a University Employee and Answered 'NO' please fill out a TSDF form.

Mailing Address:

Dept. Travel Card Used ☐ No ☐ Yes #

Reason for Trip:

Dept. PCard Used ☐ No ☐ Yes #

Travel From:

Other Procurement Used ☐ No ☐ Yes #

Travel To:

Notes

Date Leaving: Return Date:

Meeting Dates:

Personal Dates: (Business-only comparison required)

Birth Date: Gender:

Mileage #: Seating Preference:

Meals and Incidentals: Per Diem ☐ Actual ☐
Claiming less than allowable Per Diem ☐

Lodging:
Standard Rate: \$ x 150% = \$ 0.00
Lodging greater than 150% of the standard rate will require approval from the Travel Administrator

UAF Travel Admin Approval
[Domestic Per Diem/Lodging Website](#)

Estimated Costs:

Transportation: Mode of Travel \$

Lodging Days at \$ \$ 0.00

Meals Days at \$ \$ 0.00

Ground Transport \$

Registration/Other \$

TOTAL TRAVEL ESTIMATE \$ 0.00

**BY SIGNING BELOW: I, the traveler, understand that if renting a car I must obtain the most economical rate, that insurance costs will NOT be reimbursed, and anything larger than a midsize requires pre-approval. If requesting an advance, I understand that it must be cleared within 30 days or it may be withheld from my paycheck, and I must submit a Travel Expense Report within 15 days of return per UA Regulation 05.02.060.
Travel Advance (If Applicable) Amount Requested:

Traveler's Signature: Date:

Supervisor / Dept. Head: Date:

Dean/Director (out of state approval): Date:

TA No.

Encumbrance Maintenance
Travel Coordinator Use Only

| Fund | Orgn. | Acct. | Amount | TOTAL TRAVEL AMOUNT |
|------|-------|-------|--------|-------------------------|
| | | | | 0.00 |
| | | | | Less Travel Card Amount |
| | | | | Less Pro Card Amount |
| | | | | Less Other Amounts |

\$ 0.00 ⇌ Encumbrance Total ⇌ \$ 0.00

Entered By: Date: Comments:

TA Changes:

From the University Regulations

13. Travel Authorization Forms

- a. A Travel Authorization Form must be completed, approved and dated by the appropriate individuals before any financial commitment of university resources is made and before travel begins, regardless of the method of payment (corporate travel card, TR or personal funds) or the source of reimbursement (departmental funds, grants, or third party reimbursements). Failure to do so may be cause for disallowance; written justification and corrective action by the traveler and the traveler's department head is required.
- b. The business purpose or reason for travel must be clearly explained. Supporting documentation should be attached.
- c. Personal travel destinations and annual leave periods to be taken in conjunction with business travel must be clearly identified. A cost justification is required to ensure that personal travel has no adverse effect on cost to the university.
- d. An explanation of the facts and circumstances documenting the necessity to use non conventional modes of transportation such as an automobile, snowmobile or other conveyance must accompany the form. Boat or small aircraft requires SW Risk Management approval
- e. The estimated costs for the travel should be encumbered prior to incurring corporate travel card charges, issuance of a Transportation Request Form, or payment of a travel advance.

TRAVELER – Before Traveling

Only items authorized on the TA will be reimbursed.

Travel Authorization Form (TA):

1. Top left portion of the TA with: complete LEGAL name, such as issued on a government issued document and UA ID# (not SS#). Indicate the address to which the reimbursement check will be sent. Indicate the destination, business reason for the travel, and enter dates encompassing the entire trip including personal days. Attach a copy of the agenda and meeting information.
2. Estimated Costs of the TA:
 - * Do not make purchases prior to TA approval.
 - * Airline travel must comply with the Fly America Act when using Federal funds.
 - * List estimated transportation costs. Use the most justifiably direct and economical route available and when personal time will be taken, a comparative itinerary for the business only portion of the trip must be attached.
 - * Using the standard lodging and per diem rates, enter the number and allowance per travel status days. Lodging exceeding 1.5 standard rate requires business justification.
 - * For all UA Employees, if a rental car is determined to be in the best interest of the University, no additional insurance will be reimbursed, this includes the Loss Damage Waiver, the rental will be returned with a full tank of gas, and will not be larger than mid size without business justification.
 - * Itemize all other anticipated out of pocket expenses.

TA No. _____ UNIVERSITY OF ALASKA TRAVEL AUTHORIZATION

Traveler's Name: _____ Department Name: _____

UA ID: _____ Travel Coord/Phone #: _____

Employee ☐ Non Employee ☐ Student ☐ Volunteer ☐

Mailing Address: _____

Reason for Trip: _____

Travel From: _____

Travel To: _____

Date Leaving: _____ Return Date: _____

Meeting Dates: _____

Personal Dates: _____ (Business-only comparison required)

Birth Date: _____ Gender: _____

Mileage #: _____ Seating Preference: _____

ARE YOU A CITIZEN OR PERMANENT RESIDENT? ☐ No ☐ Yes

If you are not a University Employee and Answered 'NO' please fill out a TSDP form.

Dept. Travel Card Used ☐ No ☐ Yes # _____

Dept. PCard Used ☐ No ☐ Yes # _____

Other Procurement Used ☐ No ☐ Yes # _____

Notes

Reset

3. An approved copy of the TA will be returned to the traveler. Approved items may be purchased.
4. ARE YOU A US CITIZEN.....? Answer and if appropriate, attach the taxable status determination form.

ARE YOU A CITIZEN OR PERMANENT RESIDENT? YES ___ NO ___

If you are not a University of Alaska Employee and answered "NO"

Please fill out a [Taxable Status Determination Form](#)

[Taxable Status Determination Instructions for Traveler](#)

[Taxable Status Determination Instructions for Department](#)

Sign, date and return the TA with attachments to the travel coordinator.

TRAVELER – While Traveling

- Boarding passes are fine but not required, unless a change is made or a charge is on the pass.
- Scanned receipts or receipted invoices are required for all travel expenses for which reimbursement is claimed, a picture of the receipt is also allowed.
- EXCEPT, Individual expenses less than \$25 may be reimbursed without a receipt, although total unreceipted expenses may not exceed \$25 per expense report. Business purpose of expense must be clearly explained.
- Change fees are the responsibility of the traveler, unless justification as a business expense is clearly presented.

TRAVELER – After Traveling

- Submit all receipts and supporting travel documents to the travel coordinator. A Travel Expense Report (TER) should be filed with the campus travel office within 15 days of completion of the trip. Reimbursement for out of pocket travel expenses will be made to the traveler within 15 business days after a properly completed and approved TER is submitted. Unless approved by the Travel Administrator, no reimbursements will be made if requested more than 90 days after the due date.

Direct Deposit is available for travel reimbursements or other non-payroll payments to employees and students. Direct deposits are generally a faster form of reimbursement than paper checks. You are notified of the date and amount deposited to your account via email.

To open your direct deposit account:

Go to UAOnline – <https://uaonline.alaska.edu/>

Log into Secured Area

Account Information

Finance Tab

Direct Deposit Services

The following choices display:

First time setup of direct deposit

View your direct deposit setup

Change your direct deposit account

Reactivate existing direct deposit account

Delete the use of direct deposit

Change your direct deposit email address

Review your direct deposits

1. **Traveler's Name:** Complete LEGAL name, including middle name or initial as it appears on a government issued document such as a passport.
2. **UA ID:** University of Alaska Identification number. Do not enter a Social Security Number.
3. Select appropriate status of: Employee, Non Employee, Student, Volunteer.
4. **Mailing Addr:** Address to which the reimbursement check will be addressed.
5. **Reason for Trip:** Complete description and the business purpose for the travel.
6. **Travel From:** City of the point of departure
7. **Travel To:** City, State of destination.
8. **Date Leaving:** Enter first day of travel including any personal days used.
9. **Return Date:** Enter last day of travel including personal days used.
10. **Meeting Dates:** Specific days of meeting/conference
11. **Personal Dates:** Additional days not required for business purpose of the trip.
12. **Dept Name/Contact/Phone/Address:** Current information for traveler's department.
13. **Are you a US citizen...** if the traveler answers 'No' to this question, complete and submit a [Taxable Status Determination Form](#)

[Taxable Status Determination Instructions for Traveler](#)

[Taxable Status Determination Instructions for Department](#)

The screenshot shows the 'UNIVERSITY OF ALASKA TRAVEL AUTHORIZATION' form. Numbered callouts are as follows:

- 1: Traveler's Name field
- 2: UA ID field
- 3: Status selection (Employee, Non Employee, Student, Volunteer)
- 4: Mailing Address field
- 5: Reason for Trip field
- 6: Travel From field
- 7: Travel To field
- 8: Date Leaving field
- 9: Return Date field
- 12: Department Name, Travel Coord/Phone #, and Address fields (grouped by a bracket)
- 13: 'ARE YOU A CITIZEN OR PERMANENT RESIDENT?' question and 'No'/'Yes' options

Other visible fields include: Dept. Travel Card Used, Dept. PCard Used, Other Procurement Used, Notes, Personal Dates, Birth Date, Gender, Mileage #, and Seating Preference.



An agenda/schedule of conferences must be provided to confirm business meeting dates, ground transportation provisions, and Per Diem considerations. [Example Agenda](#)

14. Dept Travel Card: If the answer is 'Yes', the cost will be part of the total dollar amount entered in the Estimated Costs/Travel portion of the TA. The card may not be charged against until the TA is signed and an encumbrance entered. Then enter the confirmation number here.

15. PC Card: If the answer is 'Yes', the cost(s) will be part of the total dollar amount entered in the Estimated Costs/Other portion of the TA. The card may not be charged against until the TA is signed and an encumbrance entered. Enter a confirmation code here, if appropriate. Registration fees or educational material made available to the University through the conference, should be paid with this card.

16. Other Procurement Used: Specific circumstances may determine a Purchase Order to be the preferred method of payment. If so, this will be part of the total dollar amount entered in the Estimated Costs and may not be issued until the TA is signed and an encumbrance entered. Enter the PO number and for what it was issued.

17. Comments: Enter additional information or explanation to support the justification of this business travel.

TA No. **UNIVERSITY OF ALASKA TRAVEL AUTHORIZATION** Reset

Traveler's Name: Department Name:

UA ID: Travel Coord/Phone #:

Employee ☐ Non Employee ☐ Student ☐ Volunteer ☐

Mailing Address:

Reason for Trip:

Travel From:

Travel To:

Date Leaving: Return Date:

Meeting Dates:

Personal Dates: (Business-only comparison required)

Birth Date: Gender:

Mileage #: Seating Preference:

ARE YOU A CITIZEN OR PERMANENT RESIDENT? ☐ No ☐ Yes
If you are not a University Employee and Answered 'NO' please fill out a TSD form.


Dept. Travel Card Used ☐ No ☐ Yes # **14**

Dept. PCard Used ☐ No ☐ Yes # **15**

Other Procurement Used ☐ No ☐ Yes # **16**

Notes

17

 The Procurement Card may not be used to secure lodging or ground transportation. These costs will be out of pocket expenses to the traveler and will be reimbursed upon completion of travel and a Travel Expense Report (TER) submitted.

Per Diem/Lodging

Per diem is a predetermined daily allowance for meals and lodging based on location and the time of year.

Per diem is utilized when the traveler is in travel status, which begins when the traveler leaves their immediate work station or home, and ends when they return.

The per diem rate for meals and incidentals are based on the traveler's destination (where the traveler lays their head) It is based on a 24-hour day clock, and is reimbursed by the half-day:

Midnight to Noon

Noon to Midnight

Actual

Departments may choose to limit travel reimbursement to actual out of pocket expenses itemized through receipts garnered by the traveler. All reimbursed expenditures must meet the requirements of the University Regulations.



To be eligible for a full-day reimbursement, the traveler must be in travel status for both halves, no required amount of time.

Travel status begins when the traveler leaves their immediate work station or home, and ends when they are returned.

Please note that the meals and incidentals rates are \$60.00 for Fairbanks, Anchorage, Juneau and their surrounding areas. All other rates can be found on the GSA website below.

The University of Alaska applies the per diem/lodging rates determined by the U.S Government (with the exception of Alaska per diem rates which are determined by the University President).

Alaska Per Diem/Lodging Rates:

http://www.alaska.edu/financial-systems/unrestricted/Ak20Per20Diem_July11.pdf

U.S. Domestic Per Diem/Lodging Rates:

<http://www.gsa.gov/portal/category/21287>

Foreign Per Diem/Lodging Rates:

http://aoprals.state.gov/content.asp?content_id=184&menu_id=78

Reimbursing the actual costs for lodging and using per diem rates for meals and incidentals is the method customarily utilized.

18. Meals and Incidentals/Per Diem

Select Per Diem or Actual as the method of reimbursing subsistence expenses. This must be determined prior to travel.

19. Lodging greater than 1.5

Lodging exceeding 1.5 of the per-diem allowance, requires business justification. Conference hotels may be acceptable, since the traveler will not require daily ground transportation to attend meetings.

Estimated Costs:

20. Transportation: Mode of Travel

Enter the total estimate of transportation best suiting the business purpose from itinerary quotes.

Travel routing must be by the most direct route and cost efficient mode available.

The University supports the Fly America Act by requiring all travelers using federal funding to be on an American air carrier into and out of the United States regardless of cost and/or travel times. [Fly America Act](#)

| | | | |
|--|--|---|--|
| Meals and Incidentals: Per Diem <input type="checkbox"/> Actual <input type="checkbox"/> 18 | | Estimated Costs: 20 | |
| Claiming less than allowable Per Diem <input type="checkbox"/> | | Transportation: Mode of Travel <input type="text"/> \$ | |
| Lodging: | | Lodging <input type="text"/> Days at \$ <input type="text"/> \$ 0.00 | |
| Standard Rate: \$ <input type="text"/> x 150% = \$ 0.00 19 | | Meals <input type="text"/> Days at \$ <input type="text"/> \$ 0.00 | |
| *Lodging greater than 150% of the standard rate will require approval from the Travel Administrator* | | Ground Transport <input type="text"/> \$ | |
| UAF Travel Admin Approval | | Registration/Other <input type="text"/> \$ | |
| Domestic Per Diem/Lodging Website | | TOTAL TRAVEL ESTIMATE \$ 0.00 | |
| <small>**BY SIGNING BELOW: I, the traveler, understand that if renting a car I must obtain the most economical rate, that insurance costs will NOT be reimbursed, and anything larger than a midsize requires pre-approval. If requesting an advance, I understand that it must be cleared within 30 days or it may be withheld from my paycheck, and I must submit a Travel Expense Report within 15 days of return per UAF Regulation 05.02.080.</small> | | | |
| Travel Advance (If Applicable) Amount Requested: <input type="text"/> | | | |
| Traveler's Signature: _____ | | Date: _____ | |
| Supervisor / Dept. Head : _____ | | Date : _____ | |
| Dean/Director (out of state approval) : _____ | | Date : _____ | |



Airfare charged to the department Travel Card will be for the business portion of travel only – if personal and business travel are combined, the personal amount must be paid directly to the vendor by the traveler. The **only** exception is if a comparison itinerary for Business/Personal travel shows no additional cost to the University.

This [Alternate Travel Cost Comparison](#) worksheet may be used to determine if an alternate travel itinerary is for the travelers convenience or will provide a lower overall cost to UAF.

Both itineraries must be submitted.

The best practice is to purchase the business portion of the trip with the Department Travel card. The traveler may then change the ticket to accommodate the personal portion and pay the airline directly for the changed ticket (or to a travel agent if they accept split payments). All change fees will be borne by the traveler unless the change is directly affected by University business.

[Example Alternate Cost Comparison Itineraries](#)

21. Lodging

Enter the number of days requiring lodging and the appropriate lodging rate per day. Reasonable travel time may require one additional lodging night prior to or after the meeting days.

Non-commercial lodging (field camp, university facilities, staying with friends or relatives...) may be reimbursed at 15% of the commercial per diem, rounded up to the next dollar.

22. Meals

Enter the number of days allowing meals and the appropriate per diem allowance per day.

For every meal provided such as part of an all-inclusive registration fee, or any provided meal, one quarter-day allowance will be **subtracted** on the TER. Exceptions must be justified in writing.

23. Car Rental

Ensure a rental vehicle is justified for University business. Compare the overall costs of a rental vehicle, taxi, shuttle service, and determine which is most cost effective. The traveler must also consider the personal liability involved if the vehicle is used for any other purpose than University business. Mid sized vehicles are allowed.

24. Other

Enter the dollar amount of all charges to occur on the Departmental Procurement Card, a PO, if any, and any other expected expenses that may occur.

| | | | |
|--|--|--|--|
| Meals and Incidentals: Per Diem <input type="checkbox"/> Actual <input type="checkbox"/> Claiming less than allowable Per Diem <input type="checkbox"/> | | Estimated Costs: | |
| Lodging: Standard Rate: \$ <input type="text"/> x 150% = \$ <input type="text"/> 0.00 *Lodging greater than 150% of the standard rate will require approval from the Travel Administrator* _____ UAF Travel Admin Approval Domestic Per Diem/Lodging Website | | Transportation: Mode of Travel <input type="text"/> \$ <input type="text"/> | |
| | | Lodging <input type="text"/> Days at \$ <input type="text"/> 21 \$ <input type="text"/> 0.00 | |
| | | Meals <input type="text"/> Days at \$ <input type="text"/> 22 \$ <input type="text"/> 0.00 | |
| | | Ground Transport <input type="text"/> 23 \$ <input type="text"/> | |
| | | Registration/Other <input type="text"/> 24 \$ <input type="text"/> | |
| | | TOTAL TRAVEL ESTIMATE \$ <input type="text"/> 0.00 | |
| **BY SIGNING BELOW: I, the traveler, understand that if renting a car I must obtain the most economical rate, that insurance costs will NOT be reimbursed, and anything larger than a midsize requires pre-approval. If requesting an advance, I understand that it must be cleared within 30 days or it may be withheld from my paycheck, and I must submit a Travel Expense Report within 15 days of return per UA Regulation 05.02.080. Travel Advance (If Applicable) Amount Requested: <input type="text"/> | | | |
| Traveler's Signature: _____ | | Date: _____ | |
| Supervisor / Dept. Head : _____ | | Date : _____ | |
| Dean/Director (out of state approval) : _____ | | Date : _____ | |



An agenda/schedule of conferences must be provided to confirm business meeting dates, ground transportation provisions, and Per Diem considerations. [Example Agenda](#)

Encumbrance Maintenance

This section establishes the correct accounting structure to which the travel costs will be charged. This will also determine the dollar amount encumbered in Banner for the traveler's reimbursement of out of pocket expenses incurred while in travel status.

These accounting codes and dollar amounts will be used for the General Encumbrance entered in Banner as well as Pathway Net when reconciling the charges on the departmental procurement and travel cards.

Fund - The six digit code signifying the source of the funding. This may be the MAU's general fund (UAF's general fund is 103010), or a fund restricted to an agency's specific focus in a grant.

The fund is where the budget resides.

Orgn – The five digit organization code which holds responsibility of the funds. Generally referred to as a department.

Acct – The four digit code indicating to what category of spending the item falls.

Because account codes are specific as to what the charge is for, and impacts reports on spending, it is important to understand the differences in codes and how they are applied.

| TA No. <input type="text"/> | | Encumbrance Maintenance **Travel Coordinator Use Only** | |
|-----------------------------|----------------------|--|----------------------|
| Fund | Orgn. | Acct. | Amount |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

| | |
|-------------------------|----------------------|
| TOTAL TRAVEL AMOUNT | 0.00 |
| Less Travel Card Amount | <input type="text"/> |
| Less Pro Card Amount | <input type="text"/> |
| Less Other Amounts | <input type="text"/> |

\$ 0.00 ⇌ Encumbrance Total ⇌ \$ 0.00

Entered By: Date: Comments:

TA Changes:

FOAPAL (Chart of Account Structure)

Fund – Source of funding

General fund for the MAU

Restricted fund associated with a Grant

Organization – Unit of responsibility

Departmental Org num

Account – Category of Activity

Specifically for what purpose the money is spent.

Program

Activity

Location

****Do Not Change the Program Code****

Not used on this form

The following link gives a description of the Acct Codes used in Travel, but if a question remains as to the appropriate use of a particular code, contact your department budget office or the Travel Department for clarification. [Accounting and Administrative Manual](#) expense and revenue account codes. Use the "Find" feature in this document to search for a specific acct code.

25. TOTAL TRAVEL

Add the estimated dollar amounts from **Transportation, Lodging, Meals, Car Rental and Other.**

This is the estimated cost of the travel that must be signature approved by the appropriate supervisor and responsibilities acknowledged by the traveler.

Request government rates – ensure this is actually the most economical rate.

26. Travel Advances

Use the University Regulations based on the Board of Regents' Policy as a guideline for travel advances.

All advances and individual considerations are subject to the approval of the Travel Administrator.

Ordinarily, the following directives are utilized for travel advances unless specifically approved by the Travel Administrator.

Travel advances:

Will be limited to 80% of the expected expenses

Anticipated reimbursement will be greater than \$100 and less than \$2,500

Separate advances must be processed for each trip and may not be retained for subsequent travel, no more than 2 open advances allowed.

| | |
|---|---|
| Meals and Incidentals: Per Diem <input type="checkbox"/> Actual <input type="checkbox"/> Claiming less than allowable Per Diem <input type="checkbox"/> | Estimated Costs: |
| Lodging: Standard Rate: \$ <input type="text"/> x 150% = \$ <input type="text"/> 0.00 | Transportation: Mode of Travel <input type="text"/> \$ <input type="text"/> |
| "Lodging greater than 150% of the standard rate will require approval from the Travel Administrator" | Lodging <input type="text"/> Days at \$ <input type="text"/> \$ <input type="text"/> 0.00 |
| _____ UAF Travel Admin Approval Domestic Per Diem/Lodging Website | Meals <input type="text"/> Days at \$ <input type="text"/> \$ <input type="text"/> 0.00 |
| | Ground Transport <input type="text"/> \$ <input type="text"/> |
| | Registration/Other <input type="text"/> \$ <input type="text"/> |
| | TOTAL TRAVEL ESTIMATE \$ <input type="text"/> 25.00 |
| <small>**BY SIGNING BELOW: I, the traveler, understand that if renting a car I must obtain the most economical rate, that insurance costs will NOT be reimbursed, and anything larger than a midsize requires pre-approval. If requesting an advance, I understand that it must be cleared within 30 days or it may be withheld from my paycheck, and I must submit a Travel Expense Report within 15 days of return per UA Regulation 05.02.D60.</small> | |
| Travel Advance (If Applicable) Amount Requested: <input type="text"/> 26 | |
| Traveler's Signature: _____ | Date: _____ |
| Supervisor / Dept. Head : _____ | Date : _____ |
| Dean/Director (out of state approval) : _____ | Date : _____ |



No purchases may be made until the TA is signed and an encumbrance completed in Banner.

Check list:

1. Complete name of traveler, status, employee ID.
2. Description, location, dates of trip including any personal time involved.
3. Anticipated amount that will be charged to the Department Procurement and Travel cards, POs with comparisons where necessary.
4. Anticipated amount for lodging, per diem, ground transportation.
5. Appropriate account codes are used.
6. Ensure the form is completed with the appropriate signatures and dated.

26. Enter **TOTAL TRAVEL AMOUNT** (from Estimated Costs:)

27. Enter **Less Travel Card Amount** (from Estimated Costs / Transportation)

28. Enter **Less ProCard Amount** (from Estimated Costs / Other)

29. Enter **Less Other Amount(s)** (from Other Procurement Used and Estimated Costs / Other)

30. **Encumbrance Total** will be the difference and will equal the total of **Lodging, Meals, Car Rental** from Estimated Costs.

This is the estimated dollar amount the traveler will be reimbursed for out of pocket expenses.

31. Enter **FOAPAL** accounting information.

32. **Sign and enter the date** when the encumbrance is entered into Banner.

TA No. UNIVERSITY OF ALASKA TRAVEL AUTHORIZATION Reset

Traveler's Name: Department Name:
UA ID: Travel Coord/Phone #:
Employee ☐ Non Employee ☐ Student ☐ Volunteer ☐ ARE YOU A CITIZEN OR PERMANENT RESIDENT? ☐ No ☐ Yes
If you are not a University Employee and Answered 'NO' please fill out a TSDIF form.
Mailing Address:
Reason for Trip:
Dept. Travel Card Used ☐ No ☐ Yes #
Dept. PCard Used ☐ No ☐ Yes #
Other Procurement Used ☐ No ☐ Yes #
Travel From:
Travel To:
Date Leaving: Return Date:
Meeting Dates:
Personal Dates: (Business-only comparison required)
Birth Date: Gender:
Mileage #: Seating Preference:
Notes:
Confirmation-#
Confirmation-#

The total travel amount includes all charges against the departmental cards and PO's, as well as the out-of-pocket expenses of the traveler.

Traveler's estimated out of pocket expenses

Estimated Costs:

Transportation: Mode of Travel \$ 1,243.70
Lodging 3 Days at \$ 313.50 \$ 940.50
Meals 4 Days at \$ 137 \$ 548.00
Ground Transport Shuttle \$ 100.00
Registration/Other Conf. Registration \$ 550.00
TOTAL TRAVEL ESTIMATE \$ 3,382.20

TA No. Encumbrance Maintenance
31 **Travel Coordinator Use Only**

| Fund | Orgn. | Acct. | Amount |
|--------|-------|-------|----------|
| 103010 | 50138 | 2130 | 1,588.50 |
| | | | |
| | | | |
| | | | |

TOTAL TRAVEL AMOUNT (26) 3,382.20
Less Travel Card Amount (27) 1,243.70
Less Pro Card Amount (28) 550.00
Less Other Amounts (29) 0.00
\$ 1,588.50 ⇌ Encumbrance Total ⇌ \$ (30) 1,588.50

Entered By: 32 Date: Comments:
TA Changes:

Electronic TA

An electronic version of the TA is completed rather than a paper version. The forms are very similar.

The electronic version once completed is then forwarded via email for appropriate approval(s). Using the following format:

Subject~ TA #, Travelers name, travel dates

Text~ TA #:

Traveler's Name:

Travel Dates:

Travel Destination:

Reason for Trip:

The approver will have the option of using either an electronic signature or indicating approval by email.

Reset

TA No.

**UNIVERSITY OF ALASKA
TRAVEL AUTHORIZATION**

Traveler's Name : Sarah Sample

Banner ID : 3000000

Employee ☒ Non Employee ☐ Student ☐ Volunteer ☐

Mailing Address: 3295 College Road
Fairbanks, AK 99775

Reason for Trip: Banner Training Seminar

Travel From: Fairbanks

Travel To: Orlando, FL 32801

Date Leaving : 11/2/12 Return Date: 11/7/12

Meeting Dates: 11/3-11/6/12

Vacation Dates: (Business-only comparison required)

Birth Date: 10/02/69 Sex: Female

Mileage #: XXXXXXXX Seating Preference: Exit/Isle

Dept. Name: Financial Services

Travel Coord: Lynn Leader

ARE YOU A CITIZEN OR PERMANENT RESIDENT? ☐ No ☒ Yes

If you are not a University Employee and Answered 'NO' please fill out a TSGF form.

Dept. Travel Card Used ☐ No ☐ Yes #

Dept. PCard Used ☐ No ☐ Yes #

Other Procurement Used ☐ No ☐ Yes #

Notes

Meals and Incidentals: Per Diem ☒ Actual ☐

Claiming less than allowable Per Diem ☐

Lodging:

Standard Rate: \$ 213.00 x 150% = \$ 319.50

Lodging greater than 150% of the standard rate will require approval from the Travel Administrator

UAF Travel Admin Approval
[Domestic Per Diem/Lodging Website](#)

Estimated Costs:

Transportation: Mode of Travel Air \$ 1,158.00

Lodging 5 Days at \$ 132.00 \$ 660.00

Meals 6 Days at \$ 71.00 \$ 426.00

Ground Transport Shuttle \$ 140.00

Registration/Other Registration \$ 350.00

TOTAL TRAVEL ESTIMATE \$ 2,732.00

**I understand that a travel advance must be cleared when the travel expense report is filed, and if not cleared within 30 days of return that the advance may be withheld from my pay check

Travel Advance (If Applicable) Amount Requested:

Travel Approvals:

Supervisor / Dept. Head : Date :

Dean/Director (out of state approval) : Date :

TA No.

Encumbrance Maintenance
Travel Coordinator Use Only

| Fund | Orgn. | Acct. | Amount | |
|--------|-------|-------|----------|--|
| 103010 | 50138 | 2130 | 1,226.00 | |
| | | | | |
| | | | | |
| | | | | |

TOTAL TRAVEL AMOUNT 2,732.00

Less Travel Card Amount < 1,156.00 >

Less Pro Card Amount < 350.00 >

Less Other Amounts < 0.00 >

\$ 1,226.00
↔
Encumbrance Total
↔
\$ 1,226.00

Entered By: Date: Comments:

Group Travel Authorization Example

Except for the group leader (or whomever will be reimbursed), the group typically consists of non-university employees.

The method for estimating the total travel cost and entering data in a TA for Group Travel is the same as for Individual Travel with the exception that the dollar amounts entered are the sum of all travelers in the group.

One person, generally the group leader, will be responsible for dispersing money to the rest of the group. The TA is completed, approved, and encumbered as usual. Reimbursement may be made upon completion of travel, or a **Travel Advance** for out of pocket expenses may be requested.

An example worksheet for dispersing money to a group follows on the next slide.

TA No.

UNIVERSITY OF ALASKA TRAVEL AUTHORIZATION

Traveler's Name: Tommy Traveler +10 Dept. Name: Financial Services
 BANNER ID: 30000000 Dept. Contact: Carrie Coordinator
 Employee ☐ Non Employee ☐ Student ☐ Volunteer ☐ Dept. Phone: 2413
 Mailing Addr: 3295 College Rd Dept. Address: 7920
Fairbanks, AK 99709
 Reason for Trip: Student Intensive Workshop ARE YOU A CITIZEN OR PERMANENT RESIDENT? YES ☐ NO ☐
 If you are not a University of Alaska Employee and Answered "NO" Please fill out a TDSF form.
 Travel From: Dillingham, AK Dept. Travel Card Used ☐ No ☐ Yes # ☐
 Travel To: Fairbanks, AK Dept. PCard Card Used ☐ No ☐ Yes # ☐
 Date Leaving: 2/19/11 Return Date: 2/21/2011 Other Procurement Used ☐ No ☐ Yes # ☐
 Meeting Dates: February 19-21 Comments: Agenda/Schedule must be provided for all conference travel.
 Personal Dates: N/A Comparison itinerary Must be provided when personal leave dates are included.

Meal and Incidentals: Per Diem ☐ OR Actual ☐
 Claiming less than allowable Per Diem ☐
 Do you require approval? ☐
 Standard Lodging rate 159 x 150% = 238.50
 For approval of Lodging greater than 1.5 times (150%) the Standard Per Diem Rate, FAX this authorization form to your MAU Travel Administrator - PRIOR to any financial comment.

Estimated Costs:

Transportation: Mode of Travel Air \$ 4,356.80
 Lodging 3 Days at \$ 159.00 x 11 \$ 5,247.00
 Meals 3 Days at \$ 44.00 x 11 \$ 1,452.00
 * Car Rental XXXX Registration \$ 0.00
 Other (specify) Cab, Shuttle, Parking \$ 400.00
 TOTAL TRAVEL \$ 11,455.80

* I understand I must request the discount rate offered to government agencies and obtain the most economical rate available. Insurance costs will not be reimbursed. Exceptions must be approved in advance by the travel administrator.

** I understand that a travel advance must be cleared when the travel expense report is filed, and if not cleared within 30 days of return that the advance may be withheld from my pay check. Travel Advance (If Applicable) Amount Requested: 1,018.00

I will ensure that an expense report, with required documentation, is submitted within 15 days after travel has been completed. Regent's Regulation R05.02.06 A, 14, b. (2) Original receipts should be submitted. If not submitted, the reason for the failure to do so must be explained on the expense report.

Traveler's Signature: _____ Date: _____
 Supervisor / Dept. Head: _____ Date: _____
 Dean/Director (out of state approval): _____ Date: _____

Signatures above attest that information recorded on form is a true, accurate, and complete representation of intentions related to performance of university-related business activities.
 If for any reason the travel as requested is changed, a revised request will be submitted immediately for approval.
 No travel is to be performed until an approved authorization for specific dates is returned to the traveler.

| Encumbrance Maintenance | | | | TOTAL TRAVEL AMOUNT | |
|-------------------------|-------|-------|----------|----------------------------------|----------------|
| TA No. | | | | 11,455.80 | |
| Fund | Ordn. | Acct. | Amount | Less Travel Card Amount | <- -4,356.80 > |
| 000000 | 00000 | 0000 | 1,243.00 | Less ProCard Depart. Card Amount | <- 0.00 > |
| 000000 | 00000 | 0000 | 0.00 | Less Other Amount(s) | <- -5,247.00 > |
| 000000 | 00000 | 0000 | 0.00 | | |
| \$ 1,243.00 | | | | Encumbrance Total | \$ 1,243.00 |

Entered By: _____ Date: _____ Comments: _____

EXAMPLE OF A GROUP TRAVEL AUTHORIZATION

| Traveler Name | 27-Feb | 28-Feb | 1-Mar | 2-Mar | 3-Mar | 4-Mar | Total | Signature for Per Diem | Ground | Initial for Ground | |
|---|--------|--------|-------|-------|-------|-------|-----------------|------------------------|--------|--------------------|-----------------|
| Susan B Traveler | 33.00 | 44.00 | 44.00 | 44.00 | 44.00 | 44.00 | 253.00 | | 0.00 | | |
| Homer Homebody | 33.00 | 44.00 | 44.00 | 44.00 | 44.00 | 44.00 | 253.00 | | 0.00 | | |
| Smity S Smith | 33.00 | 44.00 | 44.00 | 44.00 | 44.00 | 44.00 | 253.00 | | 0.00 | | |
| Gumby R Flex | 33.00 | 44.00 | 44.00 | 44.00 | 44.00 | 44.00 | 253.00 | | | | |
| Simone S Someone | 11.00 | 44.00 | 44.00 | 44.00 | 44.00 | 44.00 | 231.00 | | | | |
| Madison Malone | 11.00 | 44.00 | 44.00 | 44.00 | 44.00 | 44.00 | 231.00 | | | | |
| Skye Sailor | 22.00 | 44.00 | 44.00 | 44.00 | 44.00 | 44.00 | 242.00 | | | | |
| Group Leader | | | | | | | | | | | |
| Total Cash needed | | | | | | | 1,716.00 | | 0.00 | | 1,716.00 |
| <p>Please make sure that if a person has ground transportation from home to the airport, they MUST get a receipt and turn it in to you.</p> <p>If the receipt is 15.00, you can pay them 30.00 because they will have the same expense getting from the airport back home.</p> <p>If you are covering any baggage fees, the same applies.</p> | | | | | | | | | | | |
| | | | | | | | | | | | |

Blanket Travel Authorization Example

Blanket Travel Authorizations are designed to encumber a bulk dollar amount to reimburse a single traveler for repeated travel activity - such as mileage - over the course of a determined time period, such as an entire fiscal year.

Typically, a TER is submitted for partial payment once the out of pocket expenses reach an established amount.

Damage to personal vehicle is covered by travelers insurance company, not the University.

The Blanket TA will be liquidated and closed at the completion of the fiscal year in which it is established. A new Blanket TA may be initiated in the new fiscal year.

TA No. 505701

UNIVERSITY OF ALASKA TRAVEL AUTHORIZATION

Traveler's Name : Tommy Traveler Dept. Name : Financial Services
 BANNER ID : 300-00-000 Dept. Contact : Carrie Coordinator
 Employee ☐ Non Employee ☐ Student ☐ Volunteer ☐ Dept. Phone : 2413
 Mailing Addr : 3295 College Rd Dept. Address : 7920
Fairbanks, AK 99709
 Reason for Trip : BLANKET MILEAGE ARE YOU A CITIZEN OR PERMANENT RESIDENT? YES ☐ NO ☐
 If you are not a University of Alaska Employee and Answered "NO" Please fill out a TSDF form.
 Travel From : Fairbanks Area Dept. Travel Card Used [] No [] Yes #
 Travel To : Fairbanks, AK Dept. PCard Card Used [] No [] Yes #
 Date Leaving : 7/1/2007 Return Date : 6/30/2008 Other Procurement Used [] No [] Yes #
 Meeting Dates : FY 08 mileage Comments
 Personal Dates : N/A ==>Agenda/Schedule must be provided for all conference travel.
 ==>Comparison Itinerary Must be provided when personal leave dates are included.

Meal and Incidentals: Per Diem ☐ OR Actual ☐
 Claiming less than allowable Per Diem
 Do you require approval?
 Standard Lodging rate x 150% =
 For approval of Lodging greater than 1.5 times (150%) the Standard Per Diem Rate, FAX this authorization form to your MAU Travel Administrator - PRIOR to any financial comment.

Estimated Costs:

Transportation : Mode of Travel Air \$ 0.00
 Lodging Days at \$ 0.00 \$ 0.00
 Meals Days at \$ 0.00 \$ 0.00
 * ~~Cash~~ Registration \$ 0.00
 Other (spec) Mileage \$ 1,000.00
 TOTAL TRAVEL \$ 1,000.00

- * I understand I must request the discount rate offered to government agencies and obtain the most economical rate available. Insurance costs will not be reimbursed. Exceptions must be approved in advance by the travel administrator.
- ** I understand that a travel advances must be cleared when the travel expense report is filed, and if not cleared within 30 days of return that the advance may be withheld from my pay check. **Travel Advance (If Applicable) Amount Requested:** 0.00

I will ensure that an expense report, with required documentation, is submitted within 15 days after travel has been completed. Regent's Regulation R05.02.06 A, 14, b. (2) Original receipts should be submitted. If not submitted, the reason for the failure to do so must be explained on the expense report.

Traveler's Signature : _____ Date : _____
 Supervisor / Dept. Head : _____ Date : _____
 Dean/Director (out of state approval) : _____ Date : _____

Signatures above attest that information recorded on form is a true, accurate, and complete representation of intentions related to performance of university-related business activities.
 If for any reason the travel as requested is changed, a revised request will be submitted immediately for approval.
 No travel is to be performed until an approved authorization for specific dates is returned to the traveler.

| TA No. 505701 | | | | Encumbrance Maintenance | TOTAL TRAVEL AMOUNT |
|--|--------|-------|----------|-------------------------|---------------------------------|
| Fund | Orgn. | Acct. | Amount | | |
| 000000 | 000000 | 0000 | 1,000.00 | | |
| 000000 | 000000 | 0000 | 0.00 | | |
| 000000 | 000000 | 0000 | 0.00 | | |
| | | | | \$ 1,000.00 | |
| | | | | ↔ | Encumbrance Total ↔ \$ 1,000.00 |
| Entered By : _____ | | | | Date : _____ | Comments : _____ |
| EXAMPLE OF A BLANKET MILEAGE TRAVEL AUTHORIZATION | | | | | |

WHITE - Travel Office YELLOW - Dept. Copy

Travel Forms / 02/2007

Accounts Payable
Budget & Position Management
Cash & Transaction Management
Financial Manager Resources
Financial Reports
Recharge Centers
Training
Travel

How Do I...

UAF Finance & Accounting: Travel Office



Regulations

Travel Authorization (TA)

Request Travel

Per Diem

Airfare

Personal Travel Combined with Business Travel

Car Rental

Private Vehicles

Travel Expense Report (TER)

The TER is the official document used by the traveler to account for all travel costs associated with authorized trips, as well as any related costs to be reimbursed to the traveler and should be filed with the travel office within 15 days of completion of a trip.

A TER is required for all travel conducted under a Travel Authorization Form, including travel for which all expenses are paid directly by the university.

The TER must be approved by the claimant's supervisor; however, if the trip does not deviate from the originally approved travel authorization, approval may be delegated to the supervisor's designee.

Foreign receipts must be itemized by type of expense in English. Currency exchange rates must be provided for transactions not converted to or reported in U.S. dollars by the vendor, charge card company, or bank. Currency exchange rates must be attached to the expense report when submitted.

[Travel Expense Report](#)

[OANDA Currency Converter](#)

Helpful Tools

[Acronym Glossary](#)
[Financial Services Forms](#)
[Finance & Procurement Training](#)
[How Do I...](#)
[Suggestion Box](#)
[UA Accounting Manual](#)
[UA BOR Policy & Regulation](#)
[UA Program Codes](#)

Address:

Financial Services
Administrative Services Center
3295 College Road Suite 206
Fairbanks, Alaska 99709

Mailing Address:

P.O. Box 757920
Fairbanks, AK 99775-7920

**Questions
or Comments?**
Make Suggestions Here!



Back-up: Must be provided for all expenses related to trip, including those paid on PO, ProCard & Travel Card, etc.

Electronic Travel Expense Report Form



| Fund (6) | Org (5) | Account (4) | TOTAL |
|----------|---------|-------------|-------|
| | | | |
| | | | |
| | | | 0.00 |

**UNIVERSITY OF ALASKA
TRAVEL EXPENSE REPORT**
 EXPENSE REPORTS MUST BE FILED WITHIN
 15 DAYS OF COMPLETION OF TRAVEL

☐ FINAL
 ☐ PARTIAL

| | | | | | |
|----------------------|----|---|------------|--------------------------|-------|
| Traveler Name | | Send check: <input type="checkbox"/> Home <input type="checkbox"/> Dept. <input type="checkbox"/> Direct Deposit | | Prior Encumbrance | |
| First | MI | Last | Employee | Student | Other |
| | | | ID# | | |
| Dept Purpose | | | (optional) | Phone | |

Travel Card Used? ☐ YES ☐ NO
 Confirmation Code:

 Advance Issued? ☐ YES ☐ NO
 Date: Check #:

| | Day of Week | | | | | | | | | | | TOTAL |
|-------------------|-------------|-----------|----------------|----------------|------------|--------------|------------|------------------|-----------|-----------------------|---------|--------------|
| TRAVEL TIMES | Year | Month/Day | Depart From | Departure Time | Arrival At | Arrival Time | Travel Via | Lodging | | | | \$0.00 |
| | | | | | | | | | | | | \$0.00 |
| | | | | | | | | | | | | \$0.00 |
| | | | | | | | | | | | | \$0.00 |
| | | | | | | | | | | | | \$0.00 |
| BASIC SUBSISTENCE | Meals | B. | Including Tips | L. | D. | Per Diem | Parking | Tele. and Teleg. | Misc. (a) | Ground Transportation | Airfare | Registration |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| OTHER EXPENSES | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| Sub Total | | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |

| | | | | | | | | | | | | | |
|---|--|--|--|--|--|--|--|--|--|--|--|------------------------------|--------|
| a) | | | | | | | | | | | | Procurement | \$0.00 |
| b) | | | | | | | | | | | | Airfare - Travel Card | \$0.00 |
| c) | | | | | | | | | | | | ProCard Registration | \$0.00 |
| d) | | | | | | | | | | | | Adjusted Total | \$0.00 |
| Car mileage detail form must accompany expense report if applicable. | | | | | | | | | | | | | |
| Payment requested must comply with current University of Alaska travel regulations. | | | | | | | | | | | | | |
| If airfare is utilized, <u>form</u> and <u>method</u> of payment is required, showing who paid. | | | | | | | | | | | | | |
| | | | | | | | | | | | | Cash Advance | \$0.00 |
| | | | | | | | | | | | | BAL. DUE | \$0.00 |

Receipts are required for ALL reimbursements being claimed. Agenda/Schedule MUST be attached for all conference/meeting travel. Comparison Itinerary MUST be attached for combined personal/business travel.

This electronic Travel Expense Report (TER) form is in a fillable format and contains 'notes' imbedded in cells containing a red indicator in the upper right corner. Allow your cursor to hover over the cell for hints on what data should be entered in the cell.

Use a new blank form for each new TER to avoid formula errors. Populated cells from a previous TER are easy to overlook.

General TER guidelines:

- Submit scanned receipts with the date and amount clearly marked. The TER should reflect the total cost of the trip.
- Individual expenses less than \$25 may be reimbursed without a receipt, but the total un-receipted expenses shall not exceed \$25 per expense report. A clear description of the un-receipted expense must be included.
- Receipts must clearly show who made the payment and the amount paid.
- Ensure all appropriate fields are populated.
- A signature by the traveler and supervisor affirms all information provided is accurate and complete.

| UNIVERSITY OF ALASKA TRAVEL EXPENSE REPORT | | | | | | | | | |
|--|---|----------------|--|-----------------|-------|--|------|----------------|--|
| EXPENSE REPORTS MUST BE FILED WITHIN 15 DAYS OF COMPLETION OF TRAVEL | | | | | | | | | |
| Fund (6) | Insert the account numbers to which the cost of travel is charged, and the amount charged | | | | TOTAL | | 0.00 | | |
| Traveler Name | | First MI Last | | Traveler's Name | | Verify and enter whether traveler is an employee, student, or "other." | | Dept. | |
| Dept Purpose | | (optional) | | Phone | | ID# | | Direct Deposit | |
| TRAVEL TIMES | | Day of Week | | Year | | Month/Day | | Depart From | |
| | | Departure Time | | Arrival At | | Arrival Time | | Travel Via | |
| | | Lodging | | Meals | | B. | | TOTAL | |
| | | | | | | | | \$0.00 | |
| | | | | | | | | \$0.00 | |

Prior Encumbrance
Campus TA # Travel Authorization #

Procurement Us ☐ YES ☐ NO

Travel Card Used? ☐ YES ☐ NO

Advance Issued? ☐ YES ☐ NO

Date: Check #:

Enter Identification Number.

Enter the date for each day traveled.

DO NOT fill in any totals. This form will autosum.

As the imbedded note suggests, do not fill in the Total amounts. There are formulas tied to the worksheet to accurately tally all rows.

Gracious International Inns
111 East 1st, Houston, TX. 77030
(713) 660-9379

Guest Name Auditor, Ima Folio Number K1-7077
LBJ State Off. Bldg., 111 E. 17th Suite Number 1123
Austin, Tx. 78774 Suite Type STQT
Tx. Comptroller No. of Guests 1
Rate 80.00
Account Number JAM

Arrive 10-Feb-03 Time 5:26 Depart 12-Feb-03 Time 7:23 AM

| Date | Description | Charges | Credits |
|-------------------|-------------------------------|---------|---------|
| 10-Feb-03 R11123 | Room Charge - Studio 1-4 | 80.00 | |
| 10-Feb-03 T21123 | State Occupancy Tax | 4.80 | |
| 10-Feb-03 T31123 | City Tax | 5.80 | |
| 10-Feb-03 T41123 | County Tax | 3.20 | |
| 11-Feb-03 R11123 | Room Charge - Studio 1-4 | 80.00 | |
| 11-Feb-03 T21123 | State Occupancy Tax | 4.80 | |
| 11-Feb-03 T31123 | City Tax | 5.80 | |
| 11-Feb-03 T41123 | County Tax | 3.20 | |
| 12-Feb-03 MC 7:23 | Paid-Mastercard XXXXXXXXXX790 | | 187.20 |
| Checked Out | | 0.00 | |

1. **Campus:** Enter the campus for which the traveler is associated.
2. **TA#:** Enter the TA number from the Travel Authorization form. Include the letters: 'TA'
3. **Procurement Used:** Answer 'Yes' or 'No' if the Dept Procurement Card was used.
4. **Travel Card Used:** Answer 'Yes' or 'No' if the Dept Travel Card was used. If 'Yes', enter the confirmation code related to the travel.
5. **Advance Issued:** Answer 'Yes' or 'No' if an advance was issued. If 'Yes', add the date issued and the check number. (This information may be found via FAIVNDH – Vendor history)
6. **Final/Partial:** Indicate whether this TER is [F]inal or [P]artial. (If [F]inal is indicated, the TA encumbrance will be closed, all remaining funds will be returned to the original budget, and no other payments may be processed against the TA.
7. **Send Check:** If a paper check is processed, indicate the address to which it will be sent, else select Direct Deposit. (The traveler may set up this account via UA Online).

This section will be addressed in a later slide

| UNIVERSITY OF ALASKA TRAVEL EXPENSE REPORT | | | | Prior Encumbrance | |
|---|--|--|--|--|--|
| EXPENSE REPORTS MUST BE FILED WITHIN 15 DAYS OF COMPLETION OF TRAVEL | | | | Campus 1 | |
| | | | | TA # 2 | |
| | | | | Procurement Used? 3 | |
| <input type="checkbox"/> FINAL 6 <input type="checkbox"/> PARTIAL | | | | <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| | | | | 4 | |
| Traveler Name 8 Send check: <input type="checkbox"/> Home <input type="checkbox"/> Dept. <input type="checkbox"/> Direct Deposit | | | | Travel Card Used? <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| Employee Student Other 9 | | | | Confirmation Code: | |
| First MI Last ID# 10 | | | | 5 | |
| Dept 11 | | | | Advance Issued? <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| Purpose 12 (ntinual) Phone 13 | | | | Date: Check #: | |
| Fund (6) Org (5) Account (4) TOTAL | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 0.00 | | | | | |

- 8. Name:** Enter the traveler's full name.
- 9. Traveler Status:** Employee, Student or Other.
- 10. ID#:** Enter the employee identification number of the traveler (this will be the 8 digit number beginning with the number 3).
- 11. Dept:** Enter the department responsible for the travel.
- 12. Purpose:** Enter the purpose of the business travel.
- 13. Phone:** Enter a valid telephone number for the traveler.

14. Day of Week: Enter each day of the week of travel.

15. Year/Month/Day: Enter the Year and each Month and Day of travel beginning with the first day. The traveler is in travel status on the first and last days of travel regardless if personal days are included before the business portion of the trip. An additional day of travel before or after the business meeting may be practical.

16. Depart From: Enter the City/State from which the traveler is departing.

17. Departure Time: Enter the departure time printed on the itinerary. If travel time to the airport is greater than 30 minutes, indicate this in the comment area: (a), (b), (c), (d). Personally Operated Vehicle (POV) is allowed in lieu of taxi.

[Car Mileage Reimbursement Form](#)

If personal travel is taken at the beginning or end of the trip, enter the departing or arrival time from the comparison itinerary to determine the appropriate business per diem allowance.

| | | | | | |
|-----------|--------|----------------|----------------|------|-----------|
| 14 | | Day of Week | Thurs | Fri | Sat |
| 15 | | Year 2012 | Month/Day 2/10 | 2/11 | 2/12 |
| 16 | | Depart From | Fairbanks | | Houston |
| 17 | TRAVEL | Departure Time | 6:00AM | | 8:45AM |
| 18 | TIMES | Arrival At | Houston | | Fairbanks |
| 19 | | Arrival Time | 4:50PM | | 6:45PM |
| 20 | | Travel Via | Air | | Air |

18. Arrival At: Enter the city/state at which the traveler arrives. (This is not necessarily the per diem basis. Ensure the city where the traveler 'lays his head' is used for per diem rates).

19. Arrival Time: Enter the arrival time.

20. Travel Via: Indicate the mode of transportation.

21. Lodging: From the hotel folio, enter the cost per day for the hotel room. Allowable charges are the basic room charge plus any Regional Taxes applied.

Allowable expenses **do not** include meals charged to the room, room service or movies. If business calls are made from the room, or if internet access is justified for University business, list those charges individually in the Other Expenses section, and justify the expense in the comment area: (a), (b), (c), (d).

Tips for housekeeping, concierge, or bellman services are **not** allowable expenses.

When a non University related travel companion stays in the same room, any charges associated with additional occupancy is **not** an allowable expense.

Reimbursement is made to the person incurring the expense.

| | | Day of Week | Thurs | Fri | Sat | TOTAL |
|----|--|-------------------|----------|----------|----------|----------|
| 21 | | Lodging | \$93.60 | \$93.60 | | \$187.20 |
| | | Meals B. | | | -\$13.00 | -\$13.00 |
| | | Including Tips L. | | -\$17.75 | | -\$17.75 |
| | | SUBSISTENCE D. | -\$17.75 | -\$17.75 | | -\$35.50 |
| | | Per Diem | \$71.00 | \$71.00 | \$52.00 | \$194.00 |

As the imbedded note suggests, do not fill in the Total amounts. The worksheet will accurately tally all rows.

Gracious International Inns
111 East 1st, Houston, TX. 77030
(713) 660-9379

Guest Name Auditor, Ima Folio Number K1-7077
 LBJ State Off., Bldg., 111 E. 17th Suite Number 1123
 Austin, Tx. 78774 Suite Type STQT
 Tx. Comptroller No. of Guests 1
 Rate 80.00
 Account Number JAM

Page 1

| Arrive 10-Feb-03 | Time 5:26 | Depart 12-Feb-03 | Time 7:23 AM | |
|------------------|---------------------------------|------------------|--------------|------------------------------|
| Date | Description | Charges | Credits | |
| 10-Feb-03R11123 | Room Charge - Studio 1-4 | 80.00 | | } Lodging per day is \$93.60 |
| 10-Feb-03T21123 | State Occupancy Tax | 4.80 | | |
| 10-Feb-03T31123 | City Tax | 5.60 | | |
| 10-Feb-03T41123 | County Tax | 3.20 | | |
| 11-Feb-03R11123 | Room Charge - Studio 1-4 | 80.00 | | |
| 11-Feb-03T21123 | State Occupancy Tax | 4.80 | | |
| 11-Feb-03T31123 | City Tax | 5.60 | | |
| 11-Feb-03T41123 | County Tax | 3.20 | | |
| 12-Feb-03MC 7:23 | Paid-Mastercard XXXXXXXXXXXX790 | | 187.20 | |

Checked Out

0.00

24. Parking: Enter the total amount of the parking receipt on the day printed on the receipt. If personal days are included in the parking total, pro-rate the amount entered for the business portion of the trip (valet parking is **not** a reimbursable expense).

25. Tele: Enter any phone/computer/office type expenses made for business purposes and justification documentation. Indicate to whom phone calls are made and the business purpose.

26. Misc: Misc (a) may be used for expense types other than those listed. Be sure to give a clear explanation in the comment section provided.

27. Ground Transportation: Enter the amount on the receipts of all taxis, buses, and rental vehicles. Ensure the date is clearly marked on the receipt and entered on the proper day. The rental vehicle may be entered as a total on the day of return date.

28. Airfare: Enter the amount for airfare, the amount paid for by the travel card will be subtracted in the next section.

29. Registration: Enter the amount of Registration expenses if necessary.

| | Day of Week | Thurs | Fri | Sat | TOTAL |
|----|-----------------------|-------------------|-----------------|-----------------|----------------|
| 24 | Parking | | | | |
| 25 | Internet/Tele | | | | |
| 26 | Misc. (a) | \$250.00 | | | |
| 27 | Ground Transportation | \$48.00 | | | \$25.00 |
| 28 | Airfare | \$1,202.10 | | | |
| 29 | Registration | 550.00 | | | |
| | Sub Total | \$2,424.66 | \$271.81 | \$306.06 | \$70.00 |

UNIVERSITY REGULATION

R05.02.06

b. Receipts Required

- (1) Original receipts or receipted invoices are required for all travel expenses for which reimbursement is claimed except as noted below in (2).
- (2) Individual expenses less than \$25 may be reimbursed without a receipt. Total unreceipted expenses will not exceed \$25 per expense report.

30. The **TOTAL** amount in this column will be the same as the **Adjusted Total** on the TER.

The **BAL. DUE** is the amount to be reimbursed to the traveler.

These numbers will be the same, unless a Cash Advance was issued, decreasing the **BAL.DUE**.

The FOAPAL entered will be the same as the **Encumbrance Maintenance** section on the TA, though the dollar amounts might be different.

Because the amounts encumbered on the TA are an estimate, it is possible for the actual reimbursement to be slightly higher or lower.

If the reimbursement amount is less than the encumbered amount, the invoice process will close the encumbrance and return the remaining funds to the original budget.

If the reimbursement amount is greater than the encumbered amount by 10% or more, a change to the TA must be performed to encumber the additional amount. Ensure the appropriate approval is granted before entering the change.

If it is discovered amounts were encumbered to an incorrect FOAPAL, an encumbrance change must be performed before the invoice can be keyed.

The TER must be signed by the traveler and supervisor acknowledging all amounts are correct and the TER is complete.

30

| Fund (6) | Org (5) | Account (4) | TOTAL |
|----------|---------|-------------|-----------------|
| 103010 | 50132 | 2130 | 1070.43 |
| 103010 | 50132 | 3661 | 250.00 |
| | | | 1,320.43 |

EXAMPLE OF COMPLETE PACKET SUBMITTED TO TRAVEL OFFICE UPON COMPLETION OF TRAVEL

| Fund (6) | Org (5) | Account (4) | TOTAL |
|----------|---------|-------------|-----------------|
| 103010 | 50132 | 2130 | 1,070.43 |
| 103010 | 50132 | 3661 | 250.00 |
| | | | 1,320.43 |

UNIVERSITY OF ALASKA
TRAVEL EXPENSE REPORT
EXPENSE REPORTS MUST BE FILED WITHIN 15 DAYS OF COMPLETION OF TRAVEL

Traveler Name: Shannon O'Kelley-Ault
First MI Last
Dept: OFA
Purpose: Travel seminar (optional)
Phone: 6424

Send check: ☒ Home ☐ Student ☐ Other ☒ Direct Deposit
Employee ID# 30022966

Prior Encumbrance: Campus FS TA # 351668
Procurement Us: ☒ YES ☐ NO
Travel Card Used?: ☒ YES ☐ NO
Confirmation Code:
Advance Issued?: ☐ YES ☒ NO
Date: Check #:

| Year | Month/Day | Day of Week | Mon | Tue | Wed | Thu | Fri | Sat | Sun | TOTAL |
|------|-----------------------|-------------|------------|----------|----------|---------|--------|--------|--------|------------|
| 2014 | 8/12 | 8/12 | | | | | | | | |
| | Depart From | | Fairbanks | | | | | | | |
| | Departure Time | | 1:30AM | | | | | | | |
| | Arrival At | | Mau | | | | | | | |
| | Arrival Time | | 12:03PM | | | | | | | |
| | Travel Via | | Air | | | | | | | |
| | Lodging | | \$237.56 | \$237.56 | \$237.56 | | | | | \$712.68 |
| | Meals | | | | | | | | | |
| | Including Tips | | | | | | | | | |
| | Per Diem | | \$137.00 | \$137.00 | \$137.00 | \$60.00 | | | | \$471.00 |
| | Parking | | | | | | | | | \$0.00 |
| | Internet/Tele | | | | | | | | | \$0.00 |
| | Misc. (a) | | \$250.00 | | | | | | | \$250.00 |
| | Ground Transportation | | \$48.00 | | | \$25.00 | | | | \$73.00 |
| | Airfare | | \$1,202.10 | | | | | | | \$1,202.10 |
| | Registration | | \$50.00 | | | | | | | \$50.00 |
| | Sub Total | | \$2,424.66 | \$271.81 | \$306.06 | \$70.00 | \$0.00 | \$0.00 | \$0.00 | \$3,072.53 |

a) Training Manual - available at the door for 250.00
b) Lost taxi receipt to Airport 23.00 8/12
c) Hotel is where seminar is held
d) Aug 16-23 personal days
Car mileage detail form must accompany expense report if applicable.
Payment requested must comply with current University of Alaska travel regulations.
If airfare is utilized, form and method of payment is required, showing who paid.

Traveler's Signature: _____ Date: _____
Dean's/Supervisor's Signature: _____ Date: _____

Procurement: Airfare - Travel Card \$1,202.10
ProCard Registration \$550.00
Adjusted Total \$1,320.43
Cash Advance \$0.00
BAL. DUE \$1,320.43

Receipts are required for ALL reimbursement being claimed. Agenda/Schedule MUST be attached for all conference/meeting travel. Comparison itinerary MUST be attached for combined personal/business travel.

Finsvos Rev. 6/13/2013 - 4:28 PM - Travel Expense

TA No. 351668 Encumbrance Maintenance
Travel Coordinator Use Only

| Fund | Orgn. | Acct. | Amount | 763.00 | TOTAL TRAVEL AMOUNT |
|--------|-------|-------|----------|--------|---------------------|
| 103010 | 50132 | 2130 | 1,588.50 | | 3,382.20 |
| 103010 | 50132 | 3661 | 250.00 | | 1,243.70 |
| | | | | | 550.00 |
| | | | | | 0.00 |

Less Travel Card Amount
Less Pro Card Amount
Less Other Amounts

\$ 1,838.50 ⇌ Encumbrance Total ⇌ \$ 1,838.50

Entered By: Scribble B. Clerk Date: 01/20/11 2/12/11 Comments: 1,838.50
TA Changes: