

**ATTENTION:** For all supporting documentation , redact all sensitive information such as credit card numbers, employee and student home addresses, passport numbers, social security numbers, driver’s license numbers, bank account numbers prior to submitting documents. Refer to [Campus Privacy Policy](#) for more information.

**PREPARER INFORMATION:** Please enter the current date and the contact information for the preparer.

**PAYEE INFORMATION:** (individual who personally paid for all expenses being claimed)

**NOTE:** University travelers normally shall not be reimbursed for expenses paid on behalf of other persons, except in the case of co-travelers who are sharing a room or supervised student group travel.

**Name:** (Required) Name of individual in the UC vendor system. For multiple trip expense reimbursement requests, the name will be populated on the following pages.

**Department:** (Required) Unit controlling the chartstring under which the expenses will be charged.

**Payee** (Required):

**Employee** (faculty or staff)

**Student**

**Existing vendor** (A non-UC individual who has been paid through the UCB financial system in the past)

**Other** (A non-UC individual who has not been paid through the UCB financial system in the past. A vendor form must be completed and processed before the individual can be paid. Please contact your department CAO to determine vendor form processing requirements.)

**ID:** (not required, but helpful if known) The ID for an individual who has been reimbursed through the UCB financial system in the past will be populated in the Travel and Entertainment system when their name is entered.

**Email:** (Required) Payee email.

**City of Residence:** of the Payee (Required)

**US Citizen/Permanent Resident:** (Required) If the payee is not a US Citizen/Permanent Resident, please contact your department CAO as there may be additional paperwork required.

#### **TRAVEL INFORMATION:**

**Dept Ledger Description:** (Required) An up to 30-characters description that will print as the description on ledger reports (BAIRS Reports). The field is limited to the size of the dept ledger field. Please be brief and descriptive (ie, payees’s initials, dates, location JKG 1/1/14-1/2/14 BOF travel)

**Travel Business Purpose:** (Required) A brief description of the travel activities that contribute to the mission of the University (business mtg (who you met with and their affiliation), research (include topic of research), conference (include conference name), donor cultivation (include donor name), etc.)).

**Trip Duration:** (Required) Select either “under 30 days” or “over 30 days but less than a year”

**NOTE:** If the travel is for a period greater than a year, please contact CSS Purchasing for instructions.

#### **Domestic Trips:**

**Trip Destination:** (Required) Enter the City and State of your travel destination.

**Begin Trip Date/Time/From Location:**

**Date:** (Required) The date the travel began.

**Time:** (Required) The time the travel began from their “Home” or “Office”, rounded to the nearest 30-minute period.

**From:** (Required) Check the radio button for either "Home" or "Office".

**Return Trip Date/Time/To Location:**

**Date:** (Required) The date the return travel began.

**Time:** (Required) The time the traveler arrived back at their "Home" or "Office", rounded to the nearest 30-minute period.

**To:** (Required) Check the radio button for either "Home" or "Office".

**International Trips:**

**Trip Destination:** (Required) Enter the City and Country of your travel destination.

**Destination Arrival Date/Time:**

**Date:** (Required) The date the traveler ARRIVED at their trip destination.

**Time:** (Required) The time the traveler ARRIVED at their trip destination, rounded to the nearest 30-minute period.

**From:** Not used for International Travel.

**Destination Departure Date/Time:**

**Date:** (Required) The date the traveler DEPARTED from their trip destination.

**Time:** (Required) The time the traveler DEPARTED from their trip destination, rounded to the nearest 30-minute period.

**To:** Not used for International Travel.

**Personal Vehicle Used:** (Filled in only for travel reimbursement for use of personal vehicle.)

**License Plate #:** (Required)

**Liability Insurance:** (Required) Check "Yes" or "No"

**Mileage:** (Required) Enter the summed to destination/from destination mileage. Do not include mileage for personal travel taken during the trip. Explain under "Special Circumstances".

**Per Mile Rate:** Use the form's default per mile rate (\$0.56) unless the travel was before 1/1/14.

**Mileage Expense:** (AutoCalc) The form will calculate the expense and add it to "Reimb Trip Total".

**Remarks:** (Optional)

**Rental Vehicle Used:** (Filled in only for travel reimbursement for rental vehicle.)

**How rented:** (Required)

**NOTE:** Reimbursement of rental cars is for economy-, or compact-sized vehicles only, unless a request for a larger vehicle has been approved by the dean. Attach the approval email/letter and explain in "Special Circumstances".

**Use only car rental agencies with UC contracts.** These contracts include the appropriate insurance coverage. Use only the defaults of the contract, no additional insurance/options allowed, with the exception of rentals in Alaska, Hawaii, US territories or foreign counties. Only insurance costs for these exceptional rentals will be reimbursed.

**Fleet Card:** check if the vehicle was rented using the department's Enterprise Fleet Account. NOTE: No amount is entered for rental using the department's Enterprise Fleet Account. Attach final Enterprise receipt from vehicle check-in. If personal travel was taken during the business trip, document in "Special Circumstances" and attach a check made payable to UC Regents with the traveler's submission.

**Personal Credit Card** check if the vehicle was rented using a personal credit card. Attach final receipt from vehicle check-in. If personal travel was taken during the business trip, document in "Special Circumstances". Do not include vehicle rental expenses for

personal business in the amount to be reimbursed. The amount entered will be added to “Reimb Trip Total”.

**Other Ground Transportation:** (4 optional drop down choices. Amounts will automatically sum to the trip total.)

**Select:** BART, Bus, Gas for rental car, Other, Parking, Rail/Train, Shuttle, Taxi/Cab, Tolls. Enter the summed expenses for up to 4 selected categories and explanatory remarks as needed. Attach receipts and submit with request. The amount(s) entered will be added to “Reimb Trip Total”.

**Miscellaneous Travel Expenses:** (2 optional drop down choices. Amounts will automatically sum to the trip total.)

**Select:** Baggage, Internet, Fax, Office/Supplies, Telephone, Business Center, copies, etc., Admission, Entry Fee, Other. Enter the summed expenses for up to 2 selected categories and explanatory remarks as needed. Attach receipts submit with request. The amount entered will be added to “Reimb Trip Total”.

**Conference Registration:** (paid with)

**bluCard:** enter the amount and attach the conference information and payment confirmation. The amount will not be added to the total for reimbursement.

**Personal Credit Card:** enter the amount and attach the conference information and payment information. The amount will be added to “Reimb Trip Total”.

**Airfare Expenses:** (Itinerary, showing proof of payment and dates and times of travel, REQUIRED.)

**CONNEXXUS:** Enter the Direct Bill ID: (AAAAA = first 5 characters of the traveler’s last name, nnnn = 5 numeric digits assigned by the CONNEXXUS system. Enter the amount, which will not be added to the total for reimbursement. NOTE: If the traveler uses CONNEXXUS for personal travel, airfare must be paid using a personal credit card, not with a Direct Bill ID.

**Personal Credit Card:** Enter the amount shown on your itinerary as paid in full. The amount entered will be added to “Reimb Trip Total”. If the traveler’s itinerary includes **personal travel**, the airfare must be paid by personal credit card, not with a Direct Bill ID. The traveler must also attach the airfare quote, obtained at the same time the travel books their actual airline ticket, for the personal leg(s) of the trip. Deduct the personal leg(s) quote(s) from the total airfare entered. Document in “Special Circumstances”.

**Special Circumstances:** (Briefly document any of the following special circumstances)

Special Circumstance	Domestic	International
“Shared” expenses with other travelers (see <b>Payee Information</b> )	✓	✓
Rental of non-standard category rental vehicle and/or additional insurance (see <b>Rental Vehicle</b> )	✓	✓
Non-economy air travel. Attach the note from traveler’s physician stating why the travel requires business class/1’st class travel.	✓	✓
Personal Travel expenses. Attach documentation (see <b>Personal Vehicle Used, Rental Vehicle Used, Airfare Expense</b> )	✓	✓
Meals/Incidentals exceed the \$71 daily allowance for domestic travel. Attach the justification email sent to and approved by the dean.	✓	
Meals/Incidentals exceed the international destination per diem max. Attach the justification email sent to and approved by the dean.		✓

**Daily Expenses:** (Enter up to 10 days of Meals and Incidentals and Lodging per trip)

**Domestic Trips:** There is no per diem for domestic travel. It is recommended that receipts for meals and incidentals be attached to the submission. To receive reimbursement for expenses that exceed the maximum (Meals and Incidentals and Lodging), the expense must be approved by the dean and documented under "Special Circumstances".

For each of up to 10 days:

**Drop Down Date:** Select the date the meals, incidentals, and lodging expenses were incurred.

**Breakfast:** Enter the Breakfast expense.

**Lunch:** Enter the Lunch expense.

**Dinner:** Enter the Dinner expense.

**Incidentals:** Enter the sum of the day's incidental expenses (tips to porters and/or maids).

**PDM&I:** Used only for International Travel. Do not enter expenses for Domestic Travel.

**M&I Total:** Autocalculated sum of the day's breakfast, lunch, dinner and incidental expenses.

The amount will be added to "Reimb Trip Total". The **Meals and Incidentals** maximum allowance is **\$71/day** and expenses submitted must be supported by receipts. If this total is greater than \$71, attach the dean's approval and document under "Special Circumstances".

**Lodging:** Enter the lodging expense, attach a itemized receipt, showing a zero balance, for the expense. The amount entered will be added to "Reimb Trip Total". **Lodging** expenses should not exceed 200% of the published [Federal Lodging per diem rate](#) for the trip leg destination. Lodging rates are revised yearly each October. If this total is greater than 200% of the published maximum, attach the dean's approval and document under "Special Circumstances". Lodging is automatically summed into the "Reimb Trip Total".

**International Trips:**

Click on "[Click Here for State Dept Per Diem Rate](#)". Find the per diem M&I and Lodging rates for the traveler's trip leg destination.

**Per Diem M&I Rate:** Enter the per diem M&I rate from the state department web site.

**Per Diem Lodging Rate:** Enter the per diem Lodging rate from the state department web site.

**Select Type:** enter meals, incidentals and lodging depending upon the traveler's "Select Type", for each day:

For each of up to 10 days:

**Drop Down Date:** Select the date the meals, incidentals, and lodging expenses were incurred.

For each date, enter the M&I and Lodging in the appropriate field, depending upon the "Select Type". Amounts entered will sum to "Reimb Trip Total". Attach receipts for all expenses. If the M&I or Lodging expense exceeds the daily maximum, attach the dean's approval and document under "Special Circumstances". NOTE: receipts for all expenses are required for per diem as well as itemized expenses.

	Per Diem meals & incidentals and lodging	Itemized expenses: meals, incidentals, lodging	Itemized meals & incidentals, per diem lodging	Per diem meals & Incidentals, itemized lodging
Bfast	No Entry	Receipted Bfast Expense	Receipted Bfast Expense	No Entry
Lunch	No Entry	Receipted Lunch Expense	Receipted Lunch Expense	No Entry
Dinner	No Entry	Receipted Dinner Expense	Receipted Dinner Expense	No Entry

Incidentals	No Entry	Receipted Incidentals Expense	Receipted Incidentals Expense	No Entry
PDM&I	State Dept per diem rate	No Entry	No Entry	State Dept per diem rate
M&I Total	Autocalculated	Autocalculated	Autocalculated	Autocalculated
Lodging	State Dept per diem rate	Receipted Lodging Expense	State Dept per diem rate	State Dept per diem rate

**Check of Lodging was at a conference hotel:** Check this box if your international travel was to attend a conference and you stayed at the conference hotel. The Travel and Entertainment System will then allow triple the state dept per diem rate for lodging. Conference documentation as well as lodging receipts must be attached.

**BFS CHARTSTRING DISTRIBUTION:**

**Travel Advance Rec'd?:** (Required)

**Yes:** Enter the total travel advance received in **Amt Rec'd**". The amount entered will automatically be deducted from "Total Travel Expenses to be Reimbursed". If the travel advance received was larger than the amount to be reimbursed (negative number is shown), attach a check, made payable to "UC Regents", for the amount owed. Attach the original travel advance request (and check if needed) with your submission.

**No:** no additional action necessary.

For up to 4 funding sources, enter:

**BU:** (Required for at least 1 fund source) From the drop-down menu, select:

1 = UCB campus funds

J = Office of the President funds

**ACCOUNT:** (Optional) If this field is not selected, CSS will enter. From the drop-down menu, select:

57003 – Conference/Event Registration expenses

57211 – In-State Airfare

57212 – Out-of-State Airfare

57213 – In-State NON Airfare expenses

57214 – Out-of-State NON Airfare expenses

**FUND:** (Required for at least 1 fund source)

**DEPT:** (Required for at least 1 fund source)

**PGM:** (Required for at least 1 fund source)

**CHARTFIELD1:** (Optional)

**CHARTFIELD2:** (Optional)

**AMT TO BE PAID:** (Required for at least 1 fund source) Enter the amount to be assigned to the chartstring line.

**Reimb Trip Total:** (Autocalculated, no entry) Sum of all expenses entered in form (deducted for "Travel Advance Rec'd?").

**Assigned:** (Autocalculated, no entry) Initial value is \$0.00. As "AMT TO BE PAID" fields are entered, they are summed to "Assigned".

**Remaining:** (Autocalculated, no entry) Initial value is "Reimb Trip Total". As "AMT TO BE PAID" fields are entered, "Remaining" is decremented. The field should be "\$0.00" once form is completed.

**CERTIFICATION AND SIGNATURES:**

**Traveler:** (Required) Enter the Name and Title of the traveler. The traveler signs the form (see form certification of expense language) before submission for reimbursement.

**Department Approval:** (Required for some submissions)

**Reimbursement Request for PI whose chartstring is specified:** No Department approval is required.

**Reimbursement Request for any individual other than the PI whose chartstring is specified:** Enter the name and Title of the appropriate Department CAO/Chair/Dean. The named individual signs the form before submission for reimbursement.

**Exceptional Approval Signature:** (Optional) If there were special circumstances documented on the request, enter the name and title of the dean. The dean signs the form before submission for reimbursement.