

IMSE Travel Expense Forms and Instructions

Submit your travel expense report directly in Workday or, use the forms below when sending travel expense documents to a Procurement and Expense Specialist (PES) to process the travel expense for you. You may not need to fill out all of the forms for your particular request.

For example, if you are leaving on a trip next month, and you have paid for airfare on your T&H card, you can complete the *T&H Card reimbursement Form* and send it to a PES to process for you. Then, after your trip, you would submit your *2020 Travel Reimbursement Form*. List all of your expenses, and for the airfare line, add a note to the bottom of that form stating that your flight was purchased by your T&H card and list the EXP number. Expense reports need itemized receipts, worktags, and detailed business purposes. If you do not know the worktag to use, please reach out to IMSE's Cost Center Manager, Brian Wildeboer.

Once you complete your forms, send them along with your scanned copy of the approved Travel Authorization and all receipts to a PES at **finance_delivery@iastate.edu**.

Documents:

2020 Travel Reimbursement Form: Complete this form if you are sending documents to a PES to submit your expense reports for you in Workday

P-Card, Personal/Non-Travel & T&H Card Reimbursement Form: Use only if expenses occurred on T&H card before travel (for example, purchasing airline tickets in advance). **If you are filling out the 2020 Travel Reimbursement Form after your travel, you do not need to fill out this form as well.**

Certificate of Lost Receipt (separate forms for P-cards and T&H cards): Fill out and include this form for any/each missing receipt(s)

Additional Resources:

Summary of Allowable Travel Expenses:

<http://www.controller.iastate.edu/travelinformation/allowableexpenses.htm>

Summary of Unallowable Travel Expenses

<http://www.controller.iastate.edu/travelinformation/unallowableexpenses.htm>

Workcyte job aids:

Create Spend Authorization or Cash Advance

<https://iastate.app.box.com/v/create-spendauth-cashadv>

Create Expense Report and/or Verify T&H Card Transactions

<https://iastate.app.box.com/v/create-exp-report>

View My Expense Reports and Spend Authorizations

<https://iastate.app.box.com/v/view-my-expense-reports>

2020 Travel Reimbursement Form

The traveler must claim actual expenses, except when claiming meal per diem for foreign travel.
Identify expense items paid with your Travel & Hospitality card: add code "T" next to expense amount below and add "T&H" on scanned receipt(s)

Name	Date Submitted
Detailed Business Purpose -Describe the benefit to ISU/sponsor (WHO/WHAT/WHERE/WHEN/WHY)	Business Purpose (check one)
	<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising/Development <input type="checkbox"/> Professional Development <input type="checkbox"/> Public Service/Outreach <input type="checkbox"/> Research/Scholarship <input type="checkbox"/> Recruitment (Student) <input type="checkbox"/> Recruitment (Faculty, Staff) <input type="checkbox"/> Instruction/Academic Support <input type="checkbox"/> Other (explain) _____ _____ _____

Faculty Authorization (student travel only) _____

Travel Start Date	Departure Time
Travel End Date	Return Time
Destination	
Worktag*	\$ or %
Worktag*	\$ or %

Non-Workers - External Committee Member (ECM)
(Non-ISU employee)

Mailing Address: _____

City/State/Zip: _____

Phone: _____

Email: _____

Other Info: _____

**Please include departmental detail (DD#) and assignee if applicable*

Does this trip include any personal/vacation days? NO YES

If yes, list dates:

***Codes**
 A. Parking
 B. Baggage
 C. Phone/Internet
 D. Taxi/Ground Transp
 E. Toll Road Fees
 F. Other (explain below)
 T. T&H card transaction

	Travel Date	Personal Vehicle Mileage (# of miles)	From / To	Airfare (Personal Purchase)		Rental Car		Lodging (Daily charge)		Misc. Expenses		Meals: List actual amount spent - reimbursements will be subject to the maximum rates allowable							
				(R)	Code*	(R)	Code*	(R)	Code*	Amount	Code*	Breakfast	Code*	Lunch	Code*	Dinner	Code*		
				Required	Required	Required	Required	Required	Required	Required	Required	Required	Required	Required	Required	Required	Required	Required	Required
Day 1																			
Day 2																			
Day 3																			
Day 4																			
Day 5																			
Day 6																			
Day 7																			
Day 8																			
Day 9																			
Day 10																			

Totals _____

ESTIMATED GRAND TOTAL \$ _____

Receipts are required for all expenses listed in columns marked with an (R), ALL T&H card transactions, and any other expenses \$75 or more.

Additional Travel Information
www.controller.iastate.edu/travelinformation/homepage.htm
Summary of Allowable Travel Expenses
www.controller.iastate.edu/travelinformation/allowableexpenses.htm

LODGING

Lodging Receipt: Always required, regardless of the amount

Lodging Receipt – More than one occupant: Please provide the name(s) of the other occupant(s) and the relationship with Iowa State University. If the other individuals are family members, please note on the reimbursement whether an additional charge was incurred. If an additional amount was incurred, deduct that amount from the amount being claimed. If no additional expense was incurred, please note this on the lodging receipt.

CAR RENTAL

Can claim: Actual expense. Charges must be prorated if any part of the trip was not business-related (e.g., vacation days).

Reminder: Use Purchasing's link for Enterprise and National for information on utilizing ISU contracts that include coverage for Collision Damage Waiver (CDW), Loss Damage Waiver (LDW) and liability for no additional cost.

(<http://www.purchasing.iastate.edu/contracts/?id=4>)

MILEAGE

Rates: Round-trip personal mileage rates: < 100 miles = \$0.575/mile > or = 100 miles = \$0.285/mile

Multiple Round-Trips: For extended trips, you can justify having a family member drop you off/pick you up at the airport if it meant saving an equivalent amount on parking at the airport. If this applies, please include this explanation on your Employee Reimbursement.

Business Travel: ISU does not reimburse for commuting to ISU campus. Mileage must be calculated based on departure from campus or the traveler's home, whichever is less.

MEALS

Group Meals: Itemized receipts are required. Alcohol must be deducted, unless charged to a vendor or unrestricted gift worktag with a purpose code of "General Support". The names of the attendees and the business purpose of the meal must be provided.

Individual Meals: Actual meal costs are subject to the limits set by the Board of Regents. In-state maximums are B- \$6, L-\$9, D-\$16. Out-of-state maximums are B-\$8, L-\$12, D-\$20. For domestic travel there is no "per diem" or entitlement to the maximum allowable amounts. If the traveler did not spend the maximum, the traveler should not claim the maximum. Alcohol must be deducted. Meals on trips not requiring overnight travel are required to be reported to the IRS as taxable income unless the primary purpose of the meal was to discuss business with a client (not another ISU employee).

FOREIGN PER DIEM

Allowability: Iowa State University allows the per diem method for meals on foreign travel, but not for domestic travel.

Foreign Travel: Actual expenses or U.S. State Dept. per diems.

Per diem rates available at: https://aoprals.state.gov/web920/per_diem.asp

Partial Days: The meal per diem must be prorated for meals not purchased. If a traveler is at a locale for 12 or more hours, claim one day's per diem. If the stay is more than four (4) but less than 12, claim one-half day per diem. If the stay is less than four (4) hours, no per diem can be claimed.

Incidental Expenses: Fees and tips given to porters, baggage carriers, hotel staff, and staff on ships cannot be claimed separately if a per diem reimbursement is requested.

FOREIGN CURRENCIES

Exchange Rate: Convert foreign currencies into U.S. dollars when requesting reimbursement. Calculations should be clearly shown on individual receipts. The traveler may use the credit card rate, on-site exchange rate (receipt required) or online rates:

<http://www.oanda.com/currency/converter/> (Make sure calendar shows actual dates of travel.)

BUSINESS TRAVEL COMBINED WITH PERSONAL TRAVEL

When faculty and staff combine business travel with personal travel, the following standards apply:

1. The business portion of the travel is clearly justified, explaining the benefit to ISU and the fund source.
2. The traveler provided documentation for the costs of the business portion of the trip.
3. The traveler must provide a written quote for the cost of the business portion of the trip. Regarding airfare, we need to see a written quote for the cost of the flight without the personal days. Ideally, the quote should be obtained the same day the actual airfare was booked.
4. When vacation or personal requirements cause indirect routing, the cost of the direct route required for ISU business must be compared and documented. Reimbursement is capped at the lower of the two quotes.
5. University or federal policy requirements for travel must be met for those segments of the trip identified as business related.

Note: All other expenses (e.g., lodging, car rental, parking, etc.) must be prorated to exclude personal days. Meals cannot be claimed for personal days.

P-CARD, PERSONAL/NON-TRAVEL & T&H CARD REIMBURSEMENT FORM

Attach this completed form and any associated paperwork to your Workday transaction.

- Receipt- *Itemized* cashier receipt, invoice, registration form, e-mail, etc. (When applicable, please be sure shipping charges are included on the invoice...total **must** match posted charges.)

Note: It is the cardholder's responsibility to obtain and submit necessary documentation and information so transaction can be processed **within 30 days** of the posting date.

Check One: P-Card T&H Card Non-Travel Reimbursement

Cardholder name: _____ Date of purchase: _____

Vendor: _____

Items purchased: _____

Business purpose:

(be descriptive) _____

Should include Who, What, Why, Where & When

Worktag number: _____ Amount: _____

Worktag number: _____ Amount: _____

Worktag number: _____ Amount: _____

Required for Hospitality or Group Meal Expenses Only

Beginning date: _____ Ending date: _____

Location: _____

Participant names: _____

(or attach list)

T&H CARD CERTIFICATE OF MISSING RECEIPT

This form must be completed for each missing receipt required as part of any reimbursement transaction. Acceptance of this form in lieu of the original receipt is at the discretion of the funding approver(s) and the Controller's Department, and the University is under no obligation to reimburse for unsubstantiated costs.

Employee/Payee Name _____ Transaction Date (mm/dd/yyyy) _____

Vendor Name _____ Missing Receipt Amount _____

Description of Purchase	Quantity	Cost of Item	Total Cost

REASON AN ITEMIZED RECEIPT IS NOT AVAILABLE

EMPLOYEE/PAYEE HAS MADE THE FOLLOWING ATTEMPTS TO OBTAIN RECEIPTS OR DOCUMENTATION

CERTIFICATION SIGNATURES

I hereby certify the following:

- No alcohol is being reimbursed, except with agency or general support Foundation funds.
- All goods or services purchased on this transaction were for university use. No personal purchases were made.
- I will not seek reimbursement from the university in any other manner for this transaction.
- Itemized receipt is not in my possession for the reasons stated above.
- I acknowledge that repeated lack of documentation could result in revocation of reimbursement privileges.

Employee/Payee: _____ Date: _____

Department chair/director: _____ Date: _____

(If the employee/payee is the department chair/director, please obtain signature from the employee/payee's supervisor.)

This form must be imported to an Expense reimbursement, a Supplier Invoice, or an Ad Hoc Payment in lieu of the original receipt.



IOWA STATE UNIVERSITY PURCHASING CARD PROGRAM CERTIFICATE OF LOST RECEIPT

This form should be completed for any purchasing card transaction that does NOT have an itemized receipt from the vendor. Acceptance of this form in lieu of the original receipt is at the discretion of the funding approver(s). If the form is not accepted, the cardholder must reimburse the university for the amount of the transaction.

Cardholder Name	Department Name
Vendor Name	Transaction Date (mm/dd/yyyy)
Transaction Amount \$	

<u>Description of Goods or Services</u> (Add an additional sheet if necessary)	<u>Quantity</u>	<u>Cost Per Item</u>	<u>Total Cost</u>
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$

REASON ORIGINAL ITEMIZED RECEIPT IS NOT AVAILABLE

CARDHOLDER HAS MADE THE FOLLOWING ATTEMPTS TO OBTAIN RECEIPTS OR DOCUMENTATION

CERTIFICATION SIGNATURES

I hereby certify the following:

- All goods or services purchased on this p-card transaction were for university use. No personal purchases were made.
- I will not seek reimbursement from the university in any other manner for this transaction.
- Original itemized receipt is not in my possession for the reasons stated above.
- I acknowledge that repeated lack of documentation could result in revocation of the p-card.

Cardholder: _____ Date: _____

Department chair/director: _____ Date: _____

(If the cardholder is the department chair/director, please obtain signature from the cardholder's supervisor)

Please retain this form AND check the box on the on-line reconciliation screen:

Certificate of Lost Receipt Completed