IMSE Travel Expense Forms and Instructions

For travel expense reimbursement, you will need to send all relevant documents (travel authorization form, itemized receipts, worktags, detailed business purposes, etc.) to a Procurement and Expense Specialist (PES) at finance_delivery@iastate.edu to process the travel expense for you. Below are descriptions of some of the forms you may need to send to a PES. You may not need to fill out all of the forms for your particular request. Additionally, there is information on the next page related to travel expenses such as mileage, lodging, and meals.

If you would like to complete your expense report yourself, you can follow the instructions here: Create Expense Report and/or Verify T&H Card Transactions https://iastate.service-now.com/finance?id=kb_article_view&sysparm_article=KB0011827

Documents included below:

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).

Certificate of Lost Receipt (separate forms for P-cards and T&H cards): Fill out and include this form for 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
Additional Travel Information  
[www.controller.iastate.edu/travelinformation/homepage.htm](http://www.controller.iastate.edu/travelinformation/homepage.htm) 
Summary of Allowable Travel Expenses  
[www.controller.iastate.edu/travelinformation/allowableexpenses.htm](http://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](http://www.purchasing.iastate.edu/contracts/?id=4))

**MILEAGE**

*Rates:* For travel taking place on or after January 1, 2021: the default mileage rate was decreased from $0.2875 to $0.28. The higher mileage rate decreased from $0.575 to $0.56 per mile. The traveler can qualify for the higher IRS standard rate of $0.56 if:

1. The round-trip is less than 100 miles,
2. The traveler is permanently based off-campus,
3. The traveler was unable to reserve a vehicle from Transportation Services,
4. If the traveler is not an ISU employee or student, or
5. The trip is to or from a designated airport (Omaha, Kansas City, or Minneapolis) 100 or more miles away from Ames for the purpose of obtaining a lower-cost flight.

Most trips do not qualify for the maximum rate. Please see the Summary of Allowable Expenses under the Mileage - Personal Vehicle heading for additional information.

**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 email to the PES.

**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 (in-state):* Effective August 1, 2020, ISU is switching to a per diem rate of $35 per day determined by limits set by the Board of Regents (B = $7, L = $10.50, D = $17.50). Gratuities may be included if they do not result in exceeding the allowable per diem. Alcohol must be excluded, unless charged to an unrestricted account. Must be in travel status from 7:30 a.m. through 8:00 a.m. to claim breakfast, noon through 1:00 p.m. to claim lunch, and 5:30 p.m. through 6:30 p.m. to claim dinner. Meals not requiring overnight travel must be reported as taxable, unless the primary purpose of the meal was to discuss business. The Expenses Module requires an indication for taxable meals. It is a duty of the Procurement and Expense Specialist to verify taxability of meals with no overnight stay. For individual meals out-of-state, please click here: [http://www.controller.iastate.edu/travelinformation/allowableexpenses.htm](http://www.controller.iastate.edu/travelinformation/allowableexpenses.htm)

**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 ______________

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<thead>
<tr>
<th>Description of Purchase</th>
<th>Quantity</th>
<th>Cost of Item</th>
<th>Total Cost</th>
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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.
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.

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<th>Cardholder Name</th>
<th>Department Name</th>
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<tbody>
<tr>
<td>Vendor Name</td>
<td>Transaction Date (mm/dd/yyyy)</td>
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<td>Transaction Amount</td>
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<th>Description of Goods or Services (Add an additional sheet if necessary)</th>
<th>Quantity</th>
<th>Cost Per Item</th>
<th>Total Cost</th>
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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