

Travel Reimbursement Request Checklist

In order to save time in completing this form and receipt of your check, the following "checklist" was developed. If you have questions when completing your "Travel Reimbursement Form," please call ext. 3717. Submit travel reimbursement within 30 days of travel. Receipts, copy of Travel Authorization and Travel Advance Request must be attached. Books and individual membership fees must be reimbursed by submitting a memorandum with receipts attached to your immediate supervisor and appropriate vice president.

Complete the following items:

- Dept.**, (the department in which you work), ex. "Business"
- Claim for period:** (time period of claim, usually monthly), ex. "02/01/2011" to "02/29/2011"
- Date:** (beginning date of travel), ex. "02/13/2011"
- Place Left:** (location of where travel began), ex. "SCC"
- Time Left:** (time your travel began, including a.m. or p.m.), ex. "6:30 a.m."
- Place Arrived:** (location of where travel ended), ex. "Fayetteville Tech."
- Time Arrived:** (time your travel ended, including a.m. or p.m.), ex. "9:30 a.m."
- Miles:** (number of miles traveled, personal vehicle, one way from "Place Left" to "Place Arrived), ex. 39
- Mileage Amount:** (the amount obtained by multiplying number of miles traveled by the reimbursement rate of \$55.5 cents, rounded to the nearest cent), ex. 39 miles x 55.5 = \$21.65
- Airline/Other:** (amount of airline ticket or rental car), ex. \$239.79
- Taxi or Limo:** (must have receipts and list amounts for each day, if applicable), ex. \$15.25. Note: Tips are not reimbursable.
- Lodging:** (list each day's amount, including taxes, on separate line), ex. 2/13/2011, \$65.90; 2/14/2011, \$65.90 (Note: receipt requested)
- Meals:** (all meals are reimbursed at the State rate. Receipts are not required), ex. In-State: Breakfast: \$7.75; Lunch, \$10.10; Dinner, \$17.30; Lodging, \$65.90. Out-of-State: Breakfast: \$7.75; Lunch, \$10.10; Dinner, \$19.65; Lodging, \$78.05
- Other Expenses:** (tips for hotel and airport; no receipt for tips under \$4.00), ex. \$2.00
- Registration:** (registration amount; receipt required)
- Internet Services:** (reimbursable only if being used for work. Use "Additional Explanation" section at bottom of form to explain reason.)
- Parking:** (list parking amount for each day's charge)
- On Last Day of Travel:** (must complete Place Left, Time/a.m. or p.m., Place Arrived, Time/a.m. or p.m.)
- Total Each Column at Bottom**
- Total Each Column Across**
- Gross Total:** (Total amount of trip)
- Less Advance:** (if you obtained an advance, list that amount and subtract from gross)
- Name and Address:** (Print full name and mailing address.) (Optional: Include employee ID)
- Additional Explanation:** Ex., List name of person who shared room; reason for Internet, etc.
- Signatures – faculty:** (traveler; department chair; Ron Layne; Dr. Turner) (all sign and date)
- Signatures – staff:** (traveler; supervisor, appropriate vice president) (all sign and date)

