

Western State College of Colorado

TRAVEL ADVANCE & EXPENSE - AUTHORIZATION FORM

Please print. See procedure summary on back of form.

Required information:

Name: _____ WSC ID #: _____ Phone: _____
 Department: _____ Destination: _____
 Purpose of Travel: _____
 Provide complete detail.

Persons in attendance: _____
 (For whom expenses are being claimed below)

| | | | | | |
|------------------------------------|--------------|--------------|--------------|--------------|--------------|
| | Printed Name | Printed Name | Printed Name | Printed Name | Printed Name |
| (use separate sheet if necessary). | Signature | Signature | Signature | Signature | Signature |

Type of vehicle used: Personal, State, Rental, Plane PO#'s associated with this trip: _____

Section I (optional) TRAVEL ADVANCE REQUEST

I am requesting a travel advance of \$ _____ for travel beginning _____ and ending _____.
 I understand that I must complete the statement of expenses section below and return it to accounts payable with receipts attached (including cash receipt from the cashier for any unspent cash), within two weeks from the ending date of travel. If I do not do so, I authorize the amount to be deducted from my paycheck.

TRAVELER'S SIGNATURE: _____ **Date:** _____ (International travel needs prior approval, see below)

Index _____ Account _____ Amount \$ _____ **SUPERVISOR APPROVAL:** _____
 Index _____ Account _____ Amount \$ _____ **Date approved:** _____

Section II STATEMENT OF EXPENSES

| Travel (Req: Dates, Location & Times) | | | | | Vehicle Costs/Gas | | Per Diem/Incidental Exp | | | | Lodging | Misc Only - NO GAS | |
|---------------------------------------|----------|----|------|-----|-----------------------|----------|-------------------------|-------|--------|-------------|------------------|--------------------|-----------------|
| Date | Location | | Time | | ×50¢/mile or ×Receipt | | Break-fast | Lunch | Dinner | Inci-dental | Receipt Required | Description | \$Total \$ Only |
| | From | To | Dep | Arr | Miles | Total \$ | | | | | | | |
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▶ 1. Do not total rows or columns. × see instructions on back (Put trip total on this line) → **Total Expenses** _____
 ▶ 2. Use appropriate column for listing expenses. Less: Travel Advance (from section I above, not Visa Card): _____
 ▶ 3. List travel dates, locations traveled and departure and arrival times. **Net Reimbursement Requested or Cash Returned:** _____

Index _____ Account _____ Amount \$ _____ **SUPERVISOR'S APPROVAL:** _____
 Index _____ Account _____ Amount \$ _____ **Date Approved:** _____

Prior Authorization for International Travel: _____ **Date:** _____
Estimated Amount: _____; **Index** _____; **Account** _____; (Please attach detailed budget of estimated costs)

I certify that the statements in the above schedule are true and just in all respects; that payment of the amounts claimed herein has not and will not be reimbursed to me from any other sources; that travel performed for which advance/reimbursement is claimed was or will be performed by me while on State business and that no claims are included for expenses of a personal or political nature or for any other expenses not authorized by the Fiscal Rules; and that I actually incurred or paid the operating expenses of the motor vehicle for which reimbursement is claimed on a mileage basis. Further, I hereby authorize the State to deduct from my pay any amount paid to me in excess of my actual incurred expenses.

TRAVELER'S SIGNATURE: _____ **Date:** _____

Hold at Cashier Window.
 Mail to: _____

Travel Form Procedure Summary

See WSC policy manual or go to <http://www.colorado.gov/dpa/dfp/sco/index.htm> for complete details of the travel policy, use the Alphabetical Index Link for Fiscal Rules. For any questions on this form, contact Accounts Payable @ 7028.

Advances:

- Under \$500.00: use Visa travel card at most ATM's; add 2% fee of total advance to expense report after trip, \$2.00 minimum; (do not include ATM cash advances on this form). Student travel has no minimum.
- Over \$500.00: use Section I of this form; Submit to Accounts Payable 1 week prior to departure; after trip subtract the advance from total expenses in Section II to determine reimbursement amount (return any cash to cashier).
- Over \$1,500.00: need approval from the State Controller's designee.
- Cash remaining from trip must be returned to the cashier for a receipt.

x Personal Vehicles: 50¢/mile (53¢/mile only if 4WD is actually needed & used) or actual expenses (Use Vehicle Cost Column).

Meals: If city or county is not listed below, traveler must use base rate. **Exclude meals** provided with a conference. **Incidental Expenses are:** 1) Tips **not** associated with commercial travel. 2) Transportation cost between places of lodging or business where meals are taken. 3) Mailing cost associated with travel.
Coaches: must have team members sign a roster acknowledging receipt of meal money, or receipts w/roster.
Expense reports for guests or others- to get per diem for others-their signatures must be on expense report. No meals allowed for travel wholly within a single day (no overnight). Note: for extended hours see fiscal rules.

Meal Reimbursement Limits: (receipts are not needed or required). (01/01/2011)

| | Base | High Cost | | | | |
|------------|---------|----------------|-----------------|----------------|---------------|-----------|
| Breakfast | 7.00 | 8.00 | 9.00 | 10.00 | 11.00 | 12.00 |
| Lunch | 11.00 | 12.00 | 13.00 | 15.00 | 16.00 | 18.00 |
| Dinner | 23.00 | 26.00 | 29.00 | 31.00 | 34.00 | 36.00 |
| Incidental | \$5.00 | \$5.00 | \$5.00 | \$5.00 | \$5.00 | \$5.00 |
| | \$46.00 | \$51.00 | \$56.00 | \$61.00 | \$66.00 | \$71.00 |
| | | C Butte | Ft Collins/LvLd | Boulder | CO-Sps | Aspen |
| | | Cortez/Grd Jct | Montrose | Broomfield | Denver/Aurora | Telluride |
| | | G-Wood Sps | Summit County | Douglas County | | Vail |
| | | Gunnison | Steamboat | Durango | | |

For all locations go to <http://www.gsa.gov/portal/category/21287> or call Accounting @ 2186 or @ 7028.

Lodging: Actual cost of reasonable accommodations; actual lodging receipt required (Credit card receipt will not be accepted), break out by day is not necessary.

Miscellaneous: Actual cost only.

- Taxi/shuttle
- Parking
- Telephone, Internet, Fax (State Business Only)
- Telephone (personal calls)
- x Gasoline
- Rental car
- Registrations fees

Receipt required:

- Single fee over \$25.
- Single fee over \$25.
- Single fee over \$25.
- Must be included with incidental expenses (per diem).
- All (not allowed for personal vehicle if claiming mileage).
- All
- All

Non-Reimbursable:

- Alcohol, movies, entertainment, traffic fines, personal hygiene items, laundry (except for team uniforms).
- Airfare not on a purchase order.
- Travel insurance expenses.
- International travel not pre authorized.

Account Codes:

| | | | |
|-----------------|---|--|------------------------------|
| 711303 | International - Faculty & Staff business (not including registration) | 711304 | Student teaching supervision |
| <u>In State</u> | <u>Out of State</u> | | |
| 711301 | 711302 | Faculty & Staff business (not including registrations) | |
| 711308 | 711312 | Registration & Fees | |
| 711305 | 711310 | Athletics competition | |
| 711306 | 711309 | Recruitment | |
| 711307 | 711311 | Non-employee business | |
| 711313 | 711314 | Student business | |