

Things you should know . . .

REIMBURSEMENTS

Reimbursements must be submitted within **45 calendar days from the end of the trip or from the date of the expense** Reimbursement **over 45 days** can still be submitted but would be subject to taxation, which mean it will show up as income on your taxes. This applies to UCSF employees only not guest travelers.

Required Information

- o Travel dates (departure to return)
- o Destination
- o Business purpose
- o Itemized expenses
- o Additional justification for unusual items

Submit all expenses for a single travel event in one reimbursement request with the exception of registration fees and airfare

MEALS & INCIDENTALS EXPENSES

Domestic Travel Meals

- o Based on actual expenses, up to \$62 per day cap, for travel assignments of less than 30 days within the Continental US, no exceptions, not treated as a per diem > > <https://www.gsa.gov/travel/plan-book/per-diem-rates>

Foreign Travel Meals

- o Based on actual expenses up to 100% of the combined (meals, lodging, etc.) per diem limit for that location

Meals for travel <24 hours will not be reimbursed unless the travel includes an "overnight stay" (except meal expense in connection with a business meeting)

MEALS

Required Documentation: MUST Be Itemized Receipts from restaurant or hotel services

Receipts must show

- o Vendor
- o Transaction date
- o Itemization of the charges << This applies to Room Service receipts as well
- o Proof of payment/zero balance

Electronic receipts must show

- o Transaction date (date of payment)
- o Vendor
- o Itemization of the charges
- o Proof of payment/zero balance

Cash receipts must show

- o Proof of payment/zero balance
- o No alcohol on federal awards
- o Suggested Alcohol spend, no more than **\$15/ \$20 individual drink, \$100 per bottle MAXIMUM.**

Food must be served with alcohol to counteract the effect and be within the meal limits.



Example

Proof of payment

| | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Second State 1831 N St NW Washington, DC 20036 Date: Apr 25 '15 05:22PM Card Type: Visa Acct #: XXXXXXXXXXXX5714 Card Entry: SWPFD Trans Type: PURCHASE Trans Key: FFP02980795212 Auth Code: 063066 Checks: 31 Table: 3/1 Server: 29 veine s Subtotal: 41.25 Tip: _____ Total: _____ Signature: _____ I agree to pay above total according to my card issuer agreement. **** Guest Copy **** | Second State 1831 N St NW Washington, DC 20036 29 veine s 101 3/1 CHG 31 Apr 25 '15 04:50PM 041 1 Seard Fish 25.00 1 Gouda Mash 10.00 1 Coffee 2.50 Thank You for Joining Us! Subtotal 37.50 Sales Tax 3.75 05:09PM Total 41.25 Thank You for Joining Us! |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Vendor information

Date of transaction

Itemized charges

GROUND TRANSPORTATION:

Includes taxi, Uber, bus, train, rental car, parking, etc.

Required attached documentation

- Vendor information
- Date of transaction
- Itemized charges
- Proof of payment/zero balance

Rental Car

- Renting a vehicle must not be for personal convenience. Would it be more cost effective to use a taxi?
- Utilize system-wide, contracted rental car companies
- Up to intermediate-size model
- Additional purchases of insurance are not reimbursed

Airport → Hotel



\$4.00

UBER



Airport → Home

FOG CITY NEIGHBORHOOD CAB
DISPATCH SERVICE
979 Bryant St. San Francisco, CA 94103
(415)682-9988

From: SFO To: 18/Harrison
Cab: 645 Driver: L.C.
Amount: 46.20 Date: 4/27/15

\$46.20

Only the driver may claim reimbursement for mileage for a private vehicle

Use Mileage option through MyExpense, or, include map to show distance and start/end points

- One-way
- Round trip

LODGING

Within the USA there is a **\$275.00 per night room rate maximum**, excluding taxes for travel assignments of less than 30 days within the continental US. A higher rate will be approved when:

- The traveler provides a written justification along with additional documentation such as price comparisons within the proximity of the meeting location that supports the higher lodging rate. The price comparison should be performed at the time of booking.
 - the prearranged conference lodging rate exceeds the \$275 per night cap
 - The traveler may stay at the conference hotel
 - The traveler or delegate should add a comment to the expense report explaining the conference was held at the hotel and recommended by the conference. In addition, the traveler or delegate shall provide a screenshot or other documentation showing the recommended conference hotels.
- **Hotels should be reasonable**
 - (Cap of \$275 per night)
 - **Traveler must be at least 40 miles from his/her office/home to be reimbursed, regardless of the duration of travel**
 - **Required attached documentation**
 - Hotel information
 - Traveler name
 - Dates of stay
 - Itemized charges
 - Room, tax, service charges
 - All other charges listed separately
 - Proof of payment/zero balance

HOTEL

