



# FINANCIAL CLUSTER (ME/NE/IEOR) LOCAL AND DOMESTIC TRAVEL REIMBURSEMENT REQUEST

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## DOMESTIC TRAVEL REIMBURSEMENT CHECKLIST

### CHECKLIST OF REQUIRED DOCUMENTATION TO BE SUBMITTED WITH TRAVEL REIMBURSEMENT REQUESTS REIMBURSEMENTS SUBMITTED WITHOUT **COMPLETE** DOCUMENTATION WILL BE RETURNED

- UC Berkeley Employee ID (EID) # or UC Berkeley Student ID (SID) #

All **Non-UC Employees/Students** that are **Non-US Citizens** must attach a copy of their visa, passport, and I-94 and fill out a UCB

- W-8BEN which can be found at: <http://www.ucop.edu/financial-accounting/files/taxation/w8ben.pdf> Please note that **International Visitors** must also submit the Certificate of Academic Activity which is available at: <http://ucop.edu/financial-accounting/files/taxation/coaa.pdf>

- U.S. Permanent Residents (Green Card holders) must provide a copy of their Permanent Resident card.

- Trip purpose - The travel report must specifically state the purpose of the travel or the nature of the business benefit derived as a result of the travel.

Flight itinerary/airfare receipt is required for **ALL** travel reimbursement requests (even if the airfare expense is not being claimed). Travel dates/times and explicit destination of travel must be included in the request. If trip duration exceeds seven days, please attach additional travel form(s) to report meals and lodging expenses. Per University Policy, travel reimbursement requests must be submitted **within 21 days** of the end of a trip. Otherwise, a justification for the late submission must be provided. If trip includes multiple destinations, please complete a **separate** Travel Form for each leg/destination to itemize expenses for each segment of the trip.

- Event Flyer/Brochure/Agenda or Invitation letter/e-mail showing meeting dates, times, and locations of Event is required.

- Mileage reimbursements require the vehicle's license plate number and a map with driving directions (ie. from <http://maps.google.com/>) to verify mileage

- Please note that Membership fees require approval signature from the Department Chair. Please allow additional processing time for the Financial Services Unit to obtain the necessary signature.

- Traveler's signature. (Approval signature required for requests by non-Faculty members)

- Original, itemized receipts required for all expenses (e-Tickets accepted for airfare). Name on receipts must match Traveler's name. Lodging invoices must show a zero balance at checkout. Rental car receipts must be final, show detailed charges, and proof of payment.

- Please note that it is *against* University policy to book internet travel packages of hotel/airfare/car rentals unless "each aspect of the package will be separately itemized (e.g., itemized hotel charges, airfare, car rental, etc) to assure appropriate documentation for reimbursement." (UCOP Travel Policy G-28)

- Fund source to charge

**Please submit reimbursement request electronically via ERSO's intranet system at [www.erso.berkeley.edu](http://www.erso.berkeley.edu). Please contact [financialcluster@me.berkeley.edu](mailto:financialcluster@me.berkeley.edu) for submission instructions.**



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**Please submit reimbursement request electronically via ERSO's intranet system at [www.erso.berkeley.edu](http://www.erso.berkeley.edu)**

This form is for the reimbursement of travel *within* the Continental United States.

**Please select one:**    **ME Dept**    **Jacobs Institute/ME**    **NE Dept**    **IEOR Dept**    **CET/IEOR**

Last Name, First: \_\_\_\_\_  EID or  SID #: \_\_\_\_\_

Work Phone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

City & State of Residence: \_\_\_\_\_

US Citizen?  Yes  No   \*All **Non-UC Employees/Students** that are **Non-US Citizens** must attach a copy of their visa, passport, I-94, UCB W-8BEN (<http://www.ucop.edu/financial-accounting/files/taxation/w8ben.pdf>), and a Certificate of Academic Activity (<http://ucop.edu/financial-accounting/files/taxation/coaa.pdf>). U.S. Permanent Residents must provide a copy of their Permanent Resident Card.

**Trip Purpose:** \_\_\_\_\_

Trip Destination (City, State)	Departure Date	Departure Time	Return Date	Return Time

Airfare: \_\_\_\_\_ - Charged to CTS: \_\_\_\_\_ = Amount to Reimburse: \_\_\_\_\_      Baggage Fees: \_\_\_\_\_  
 Rental Car: \_\_\_\_\_      Rental Gas: \_\_\_\_\_      Parking: \_\_\_\_\_      Tolls: \_\_\_\_\_  
 BART: \_\_\_\_\_      Shuttle: \_\_\_\_\_      Taxi/Cab: \_\_\_\_\_      Rail/Train: \_\_\_\_\_  
 Private Car Mileage: \_\_\_\_\_ @ .54¢ = \_\_\_\_\_      Does vehicle have liability insurance?  Yes  No      License Plate: \_\_\_\_\_  
 From: \_\_\_\_\_      To: \_\_\_\_\_      From: \_\_\_\_\_      To: \_\_\_\_\_  
 Other: \_\_\_\_\_      Description: \_\_\_\_\_      Total Transportation Expenses: \_\_\_\_\_

**MISCELLANEOUS EXPENSES**

Registration Fees: \_\_\_\_\_      Membership Fees: \_\_\_\_\_      Phone/Internet: \_\_\_\_\_      Fax/Copies/Supplies: \_\_\_\_\_  
 Other: \_\_\_\_\_      Description: \_\_\_\_\_      Total Miscellaneous Expenses: \_\_\_\_\_

**DAILY EXPENSES: (i.e. tips, laundry, porter) All inclusive daily total allowance max. \$74.00 (prior 1/1/16 \$71.00)**

Was there any alcohol consumption claimed as part of your meal expenses for the trip?       No       Yes

Date:							
Breakfast:							
Lunch:							
Dinner:							
Incidentals:							
<b>Total:</b>							
<b>Lodging:</b>							

**Total Amount Requested: \_\_\_\_\_      Total Daily Expenses: \_\_\_\_\_**

Partial expense paid by others?  No  Yes      Pls Explain: \_\_\_\_\_

Account	Fund	Org ID	Program	Project	Flexfield	Amount

*I hereby certify that the above is a true statement, that the expenses claimed were incurred by me on official University business on the dates shown, and that I have attached original receipts as required by University and Departmental policy.*

\_\_\_\_\_  
Traveler Signature

\_\_\_\_\_  
Date (mm/dd/yy)

\_\_\_\_\_  
Approver's Printed Name and Signature

\_\_\_\_\_  
Date (mm/dd/yy)