

TRAVEL CLAIMING PROCEDURES

(How to Complete a Travel Claim-Form AUD-26)

Travel Claims for mileage only are to be filed no more frequently than monthly, preferably within fifteen days after the end of the month.

Per Diem rates can be found at <https://www.gsa.gov/perdiem>.

Travel Claim forms and other travel forms can be found on the Auditor-Controller's Intranet site.

HEADER

INVOICE NUMBER AND VENDOR ID

1. **INVOICE NUMBER** - Use an abbreviated description of the meeting and date or month, max 16 characters, for example Invoice: CSDA March 15.
2. **VENDOR ID** - Enter the seven-digit vendor ID assigned to this employee (EE6 + 5 digit EE #)

All employees will have permanent vendor IDs. The address will be the department. Warrants are not sent by interoffice mail. Warrants are released in a batch the day after the warrant run to a department representative, who distributes to employees. Alternatively, employees can elect to be paid via EFT.

3. **DATE** – Enter the date this form is completed.
4. **TOTAL CLAIM** - This is a calculated field.

CLAIMANT AND DEPARTMENT

5. **CLAIMANT**- Enter the name of the employee being reimbursed.
6. **WORKSITE** – Use the address of the work location.
7. **DEPARTMENT** - Enter the department the employee works for. Employees who receive reimbursements will have the department name listed as their address. These warrants will be picked up by the department.
8. **PHONE** – Enter the extension of the person being reimbursed.
9. **REVIEWED BY** – Print the name of the person reviewing the form.
10. **PHONE** – Enter the extension of the person reviewing the form.

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DETAIL

11. **DESCRIPTION** - Indicate Month and Purpose of Travel.
12. **GL KEY (GENERAL LEDGER KEY)** - Enter the six-digit number assigned to your particular department or agency.
13. **GL OBJ (GENERAL LEDGER OBJECT CODE)** – The five-digit gl object is already populated for lodging, meals, mileage, and 69298 is defaulted for 'other'. However, if you need to use any other object codes, please see complete listing of object codes that apply to transportation and travel below.

62910 Air Fare	62922 Lodging
62912 Auto Rentals	62924 Meals
62914 Education & Training	62926 Mileage
62916 Executive Auto Allowance	62928 Other
62918 Extra Prisoners Out	62930 Registrations
62920 Gas, Oil, Fuel	62935 Service Center Chg
62940 Travel Advances	

14. **JL KEY (JOB LEDGER KEY)** - Enter the job ledger key associated with this travel claim. Not all departments will use this field.
15. **JL OBJ (JOB LEDGER OBJECT CODE)** - Enter the job ledger object associated with this travel claim. In most cases, this will be the same as the GL OBJ. Not all departments will use this field.
16. **AMOUNT** - Enter the appropriate amounts for meals, mileage, lodging, other, etc. Receipts are required for toll bridge fees, parking fees, etc. Lodging reimbursement requires the agenda, brochure, letter or invitation justifying overnight stay.

If a travel advance was previously given, the amount of the advance should be deducted in arriving at the total amount of the claim.

When accounting for a travel advance, enter the invoice number from the original travel advance claim in the description field on the travel advance line. Enter the travel advance amount in the amount column. If travel advance amount is more than the total claim, the excess must be returned to the payroll section with the travel claim.

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17. ITEMIZATION OF TRAVEL

On the bottom half of the form, enter the Dates of travel, County of travel, City of travel, and Time of Departure and Return. Time of Departure and Return is required for meal reimbursement. A copy of the agenda or course description should be attached to the claim.

Refer to Title I, Section 100 of the County Procedures Manual for complete rules and regulations concerning meals. Enter the Actual or Per Diem amounts of meals and lodging for each day. An Incidentals allowance of \$5.00 should be included for overnight stays. The totals carry forward to the top half of the form automatically.

18. CLAIMANT

Claimant must sign and date. Signature stamps are not allowed.

19. DEPARTMENT HEAD

Department Head or authorized representative must sign and date. No signature stamps are allowed. All claims must be signed by an authorized administrative person, higher in rank than the claimant, except the department heads themselves. A list of all department-authorized signatures must be maintained with the Auditor-Controller's Claims Section. Blank forms are available from the Auditor-Controller's office (AUD-16).

20. MILEAGE DOCUMENTATION

The back of the claim form is to be used for claiming mileage. Date, time, origin, destination, purpose of trip, odometer, and miles claimed must be entered in the spaces provided. Failure to provide all information will result in delay of payment.

Mileage will be reimbursed at the maximum allowable IRS rate for most employees-see exceptions in Personnel Section 165.E.1 or talk to your department manager.