

POST TRAVEL EXPENSE

Traveler's Name: _____
 Traveler's Email: _____
 Address: _____
 Phone: _____

Trip Number: _____ Date: _____

FAST Office Use Only	AP Review:	YES	NO
Document #	_____		
Date Due:	_____		
Prepared by:	Email:	Ext:	
Vendor#@	_____		

Destination(s)	Traveler's Status
Purpose of Travel	US Citizen: Yes _____ No _____
Departure Date: _____ Time: _____	Foreign: Visa Type _____
Return Date: _____ Time: _____	UC Student Campus _____
	UC Employee Campus _____

Payments Made To/Or On Behalf Of Traveler	
Airfare	_____
RegFee	_____
Lodging	_____
Total	_____

If travel includes personal travel, record times/dates based only on the business portion of the trip. Provide explanation of personal travel.

Note: Only Enter Numerical Values

Cash _____ Enter cash advances from UCSC

Description of Expense	Date							TOTAL	COMMENTS
	Date	Date	Date	Date	Date	Date	Date	EXPENSE	
Airfare *									to/fr:
Std. Airport Rate (to/fr:)									Specify Airport:
Personal car mileage									(Round to the nearest mile for auto calculations)
Reimburse - 50.5¢ per mile Effective - Jan 1, 2008									to/fr:
Personal car mileage									(Round to the nearest mile for auto calculations)
Reimburse - 58.5¢ per mile Effective - July 1, 2008									to/fr:
Rental Car * (exclude ins.)									to/fr:
Other Transportation									to/fr:
Parking/Tolls									
Conference Registration*									
Lodging * (rm+tax only)									
Meals & Incidentals									Claim ACTUAL costs for meals/incidentals, up to \$64/day
Foreign Per Diem									
Long Term									
Miscellaneous (explain)									
**Totals from other forms									Less Payments on behalf of Traveler Less Cash Advance Due to Traveler or <Due to Regents>
TOTALS:									

* Must submit original receipts. ** Use additional forms for further expenses and explanations

Traveler's certification: I certify that the above is a true statement, that the expenses claimed were incurred by me while on official University business on the dates shown, and that I have attached original receipts for each expense of \$75.00 or more, as required by University policy. I certify that I have complied with California's auto liability insurance law while operating my personal automobile on University business.

 Traveler's Signature - Required

Sign and Date

 Other Authorizing Signatures
 Sign and Date

Amount to charge FOAPAL				
Fund	Org	Account	Activity	Amount

 Authorized Funding Signature and Date



Center for Adaptive Optics

Travel Reimbursement Instructions

Please submit the forms and receipts below to:
Attn: Debbie Myers, Center for Adaptive Optics,
University of California Santa Cruz, Santa Cruz, CA 95064

If you have any questions, please contact Debbie Myers at damyers@ucolick.org or 831-459-5753.

Required for all participants who wish to be reimbursed for travel expenses:

- You must always fill out and SIGN a **POST TRAVEL EXPENSE** form.
- If you have not previously been reimbursed by UC Santa Cruz, have changed your mailing address or if you are not a US citizen, you will need to fill out a **PAYMENT DATA RECORD** form STD 204. This form allows the accounting system to cut a check for you. If you are in doubt, fill it out.

Resident Aliens (holders of Green Cards): You must attach a copy of your Green Card.

Foreign Visitors (holders of B-1, B-2, WB, WT, J-1, F-1 and H1B Visas) – Additional Requirements:

- A copy of the foreign visitor's I-94 record is required and signature page of passport
- A CERTIFICATION OF ACADEMIC ACTIVITY form is required for B-1, B-2, WB and WT visas.

Receipts ****NO TRAVEL PACKAGE DEALS WILL BE ACCEPTED****

- It is the traveler's responsibility to properly account for all travel by obtaining receipts and/or other appropriate documentation.
- A conference or meeting agenda must be attached to the Post Travel Expense Report Form to substantiate the business purpose of the trip.
- Meal Allowance: Up to \$64.00 per day

Original receipts are required for:

- **Airfare costs / Aircraft (Private) ****You must fly with a US Carrier******
- **Lodging**
- **Rental Car; Automobile usage (personal); Bridge tolls; Parking; Road tolls; Rail travel costs**
- **Local transportation (Taxi, Public Transportation)**
- **Registration fees for conferences, conventions or meetings**
- **Misc. expenses greater than \$75 (Telephone calls, baggage fees, foreign travel fees, etc.)**

Car Rental Instructions for University of California academics and staff:

The University of California will not reimburse for added car insurance when you rent a car, so if you don't personally have insurance that covers car rentals, the University has negotiated car rental agreements with several car rental companies that include insurance. University agreements cover any damage sustained by the rental vehicle and provide increased liability coverage. In order to be covered you must identify yourself as a University employee and provide the applicable UC ID#.

Car Rental Instructions for Non-University of California employees:

Check with your institution for their rental car rates and policies. Use your institution's rental car agreements if possible to ensure the best rates and coverage. If your institution does not have a car rental agreement, and you do not have personal insurance that covers car rentals, non-UC employees should accept Liability (LDW) and Collision (CDW) Damage Waiver insurance ONLY when renting a vehicle. Please note that car rental companies will offer you many different types of insurance, which you should decline. We can only reimburse for Liability and Collision insurance.

Personal Vehicle Reimbursement Information for 2008 – Reimbursement for all mileage is reimbursed at 58.5 cents/mile for travel occurring after 1 July 2008.

Xerox copies of receipts are not acceptable. The original receipts must be submitted

Ticket-less airfare expenses will not be reimbursed unless an original copy of the e-ticket is submitted. You may request an e-ticket receipt at the airport. Please note that an itinerary or invoice is **NOT A RECEIPT**.