

## Post Travel Form

Travel reimbursement assistance may be available through the department administrative office *depending* on the current workload of administrative staff. Requests for assistance are made by contacting the department's administrative associate, who will determine if assistance can be provided. The traveler/requester must complete the form below and provide **ALL** documentation in packet form for completing reimbursement paperwork. **Please** review to insure all items necessary for completion of the UA Travel Expense Report have been included. Missing documentation is the responsibility of the traveler/requester, *not the administrative staff's*, to acquire. All packets will be reviewed and packets found to be incomplete will be returned to the person(s) submitting the original request for completion.

**Students/Staff** – Complete post travel form, then complete the expense report and Disbursement Voucher in UAccess. Print the DV coversheet and submit with the original receipts **within 10 business days of completed travel to the EPI/BIOS Accountant: Amy Maniscalco: [amaniscalco@email.arizona.edu](mailto:amaniscalco@email.arizona.edu)/520-626-4937**

**Faculty** – Complete post travel form & submit with the original receipts to [COPH-EBTravel@email.arizona.edu](mailto:COPH-EBTravel@email.arizona.edu) **within 5 business days of completed travel.**

|                                                                                                                                                                                                                                                                                                              |                       |                |                |                                                                          |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|----------------|----------------|--------------------------------------------------------------------------|-------------|--|
| Name of Requesting Faculty/Staff:                                                                                                                                                                                                                                                                            |                       | EmpID          | Account #      | Travel For (Check one):<br>In-State      Out of State      International |             |  |
| Purpose of Trip                                                                                                                                                                                                                                                                                              | Location (City/State) | Departure Date | Departure Time | Return Date                                                              | Return Time |  |
| If you used designated lodging, please remember to submit proof of designated lodging from the conference website. If you shared the room with anyone, please list the individual, their TA #, their affiliation to UA, reason for travel, and if they paid anything toward the expenses in the space below: |                       |                |                |                                                                          |             |  |

### Documentation Required for Travel Reimbursement Assistance

Copy of official signed UA Travel Authorization form or UA Travel Authorization #. **(This is not the administrative offices Responsibility to track down – it is the traveler's responsibility to provide when requesting help with reimbursement)**

#### Air Travel

Documentation (such as e-ticket) and flight itinerary, showing **proof of payment**

Any change fees or additional charges must have a valid business purpose. Explanation and supporting documentation must be submitted, including **proof of payment**.

Checked baggage – original receipts or credit card statement showing **proof of payment** must be included

#### Ground Transportation

Original receipts and **proof of payment**; i.e. taxi, tolls, parking, train boarding passes

Mileage – specify starting point and destination. Document with Google Maps, MapQuest or equivalent

Final itemized car rental paperwork showing **proof of payment**

Original itemized gas receipts (showing # of gallons and price per gallon)

#### Lodging Documentation

Final itemized hotel bill showing all hotel charge details with a \$0.00 balance and **proof of payment**

For designated hotels, a copy of conference material listing “designated lodging”, including designated hotel rate, must be included.

#### Business/Conference Related Meals\*

List of attendees, business purpose, and **proof of payment**, including gratuity (**20% max**). **Remember alcohol is not allowed \*If staying with family/friends, the cost cannot exceed the meal reimbursement amount allowed for location.**

Copy of the meal reimbursement rates for travel destination (see State of Arizona Accounting Manual for current rates)

<https://qao.az.gov/sites/default/files/5095%20Reimbursement%20Rates%20%20171010.pdf>

|                                                                                                                 |       |       |       |       |       |       |
|-----------------------------------------------------------------------------------------------------------------|-------|-------|-------|-------|-------|-------|
| Check all meals <b><u>NOT</u></b> provided as part of the conference/meeting you are seeking reimbursement for: |       |       |       |       |       |       |
| Date:                                                                                                           | Date: | Date: | Date: | Date: | Date: | Date: |
| B                                                                                                               | B     | B     | B     | B     | B     | B     |
| L                                                                                                               | L     | L     | L     | L     | L     | L     |
| D                                                                                                               | D     | D     | D     | D     | D     | D     |

**Registration Reimbursement**

- Copy of completed conference or meeting registration form. On-line registrations should be printed prior to registering when possible
- Proof of payment for registration must be provided
- Copy of conference or meeting program/agenda showing pricing structure with notation if meals are included in event

**Was P-Card used for payment of some of the travel expenses? If so, indicate whose P-Card was used below:**

**International Travel**

**Reminder** - All UA employees, students, volunteers, participants, and Designated Campus Colleagues (DCC) **MUST** register with the UA International Travel Registry **45 days prior** to departure when traveling on official UA International business

**PLEASE READ:** Travelers who fail to submit required international travel information and obtain applicable reviews, approvals, permits, and licenses in advance of the trip may result in having the trip designated as non-UA authorized, which may result in disciplinary action, non-reimbursement of travel expenses, ineligibility for UA insurance during the trip, and limitation for future travel. (See <https://www.fso.arizona.edu/travel/international> for more information regarding international travel and UA policy and Procedures)

Submitted by:

Phone number:

Date submitted: