<u>Travel Request</u>- Per Board Policy, Travel Requests must have prior approval 5 days in advance of your travel. Any out of state travel must be included in the board agenda as an information item. You will have to create three Purchase requisitions for one travel:

- 1. Requisition for reimbursement to employee (Employee should be listed as the vendor)
  - a. You must add one line for each meal the person may be entitled to. For Example, if a person is entitled to Breakfast, lunch and dinner for a certain date, you should have three lines for that date.
  - b. One line for mileage if employee is taking their own vehicle (miles from mapquest times 2 times .575 per mile. (Please see Board Policy AP-6531-PVC, Item 5, which states "Travel by automobile shall be college-owned vehicles unless approved in advance by the Chief Business Officer.")
  - c. Cab fare, bus fare, subway, etc.
- 2. Requisition for the conference The conference fees can usually be paid by check.
- Requisition for Any Credit Card items, vendor is Union bank (Airfare, <u>or anything that you</u> <u>cannot buy with a purchase order or check</u>). For hotel accommodations, you must complete a credit card authorization form in order for your room to be paid.

Complete Travel Request Form making sure to fill out every box. For 2015 Rates are as follows: .575 per mile; \$12.00 Breakfast; \$18.00 Lunch; \$36.00 Dinner. In order to claim Breakfast you must leave before 7:00 a.m. In order to claim dinner you must arrive to campus later than 7:00 p.m.

RAVELREQUESTFORM	
TODAY'S DATE	
LOCATION	
BUDGET TO BE CHAR	GED
DATE	INITIALS
	LOCATION

TRANSPORATION: DISTRICT VAN A B RENTAL CAR	
AIRFARE	\$
PARKING FEES	<u>s</u>
OTHER	\$
TRANSPORTATION TOTAL	<u>\$ 0.00</u>
LODGING:	
NUMBER OF NIGHTS	
NIGHTLY ROOM RATE	<u>s</u>
LODGING TOTAL	\$ 0.00
REGISTRATION FEE:	S EN
CASH ADVANCE	<u>s</u> v
(FOR PLANE, LODGING, AND/OR REGISTRATION FEES ONLY)	PF
TOTAL ESTIMATED REQUEST	\$0.00

MEALS:				
DATE	В	L	D	TOTAL
				0.00
				0.00
				0.00
				0.00
				0.00
			Meal Total	\$ 0.00

EMPLOYEE'S SIGNATURE\_\_\_\_\_\_

PRESIDENT'S SIGNATURE\_\_\_\_\_

#### REIMBURSEMENT CLAIM (PLEASE COMPLETE AFTER TRAVEL)

TRANSPORATION:		MEALS:				
DISTRICT VAN A B	_ 1 2	DATE	В		D	TOTAL
RENTAL CAR	\$					
AIRFARE	5					
PARKING FEES	\$					
OTHER	5					
TRANSPORTATION TOTAL	<u>s</u>					
LODGING:						
NUMBER OF NIGHTS						
NIGHTLY ROOM RATE	s				Meal Total	\$
LODGING TOTAL	5	*I certify that the f	oregoing clain	n is a true and a	accurate accou	nt of
		expenses incurred	by my attenda	ance at the abo	ove meeting.	
OTHER EXPENSES:	s	EMPLOYEE'S SIGN/	ATURE			
REIMBURSEMENT TOTAL:	s					
LESS CASH ADVANCE	s	VICE PRESIDENT'S	SIGNATURE			
NET CLAIM	\$	PRESIDENT'S SIGN	ATURE			

(Example of Employee Reimbursement Requisitions)



Modify Purchase Requisition			
County 33 - RVERSDE COUNTY - District P	5 - PALO VERDE COMMUNITY COLLE	a 🗉	
Fiscal Year 2			
Purchase Requisition Number			
Purchase Requisition Prefix			
Purchase Requisition Status		•	
Primary Vendor:			
Vendor Name:	VIND.		
Ship To Location:			
Worksite Location:			
P.R. Originator User ID			
Copy From		1.0	
Purchase Requisition Number:	Show Previous Year Purchase		

S Modify Purchase Requisition - Galaxy Production	
Menu         Modify Purchase Requisition           Search         Details         Items         Notes         Approvals         Cost Distribution	Carsion Carsion
District: 05 - PALO VERDE COMMUNITY COLLEGE Fiscal Year: 2016 P.R. Number: R0000NEW	Delete
P.R. Type: N - NORMAL Date Due: 11/17/2015 P.R. Status: N - NEW (NOT SUBMITTED FOR APPROVAL) Vendor Name Search: STEPHANIE*	Should be Employee's name
P.R. Amount Category: TRAVEL ANY TRAVEL Should be travel Vendor Phone Nbr: Fax Nbr	
P.R. Requestor: DIR Public Works Contractor Registration Number: DIR Public Works Contractor Registration Number: Approval List Bill To Location: CORPORATE Plate Community Corporate Comm	
P.R. Originator User ID: 161181 Ship To Location: CORPORATE Palo Verde Community C SLAGAN, STEPHANE MARE Worksite Location: CSB COLLEGE SERVICES BUILDING	
Contact Phone Nbr: Tax Rate: 0.0800 ard Rpt. Desc: TRAVEL REIMBURSEMENT	Should be travel reimbursement
Update Routing should be your department Routing: BUSINESS SERVICES	reimbursement
In Rev. Rev Cmt.	e X Cancel
Modify Purchase Requisition - Galaxy Production	
Menu Modify Purchase Requisition           Search         Details         Items         No.         Click Items Tab	
Vendor: STEPHANE SLAGAN Fiscal Year: 2016 Click Acct Distribution	Acct. Dist.
Show Description Edit Desc. Discount Amt: 0.00 Pct: 0.000000 Freight Amt: 0.00	ew Expand C Close
Line Nbr. Fiscal Year Item Name Description Quantity Unit Price U/M Amount Discount Amount Freig	Freight ht Amount Tax
Add Line Add Acct. Add Fav. ➡Dup Delete	> X Cancel

Modify Purchase Requisition	- Galaxy Production	
Menu Modify Pure Search Details Items	Notes     Approvals     Cost Distribution	
Vendor: STEPHANIE SLAGA	Enter the Account Distribution Information	Acct. Dist.
Show Description	P.R. Number: R0000NEW	© Expand © Close
P.R. Line Line Nbr. Fiscal Year Item Na	Fund         School         Resource         PY         Goal         Function         Object         Percond         2 <sup>nd</sup> add           11         BSV         0000         4         6720         0000         5220         1.00000C         2 <sup>nd</sup> add           Total:         1.0000C	budget line(s)
	+ Add 1 <sup>ST</sup> Click Add Delete Save 3 <sup>rd</sup>	Click save
•		ŀ
Add Line Add Acct.	Add Fav. BDup Delete	Save X Cancel

Modify Purchase Requisition - Galaxy P	oduction	S * MECO ME	
Menu Modify Purchase Search Details Items Notes	Requisition Approvals Cost Distribution		Canada Sector
Vendor: STEPHANE SLAGAN	Fiscal Year: 2016	P.R. Number: R0000NEW	Acct. Dist.
Line Nbr. Fiscal Year Item Name	Description Quantity Unit Pric	e U/M Amount Discount	Discount Amount Freight Amount Tax
			► I
Add Line Click Add	BDup Delete		Save X Cancel



Modify Purchase Requisition - Galaxy Production	
Menu         Modify Purchase Requisition           Search         Details         Items         Notes         Approvals         Cost Distribution	
Vendor:       UNION BANK - FIRST BANKCARD         ✓ Show Description       Edit Desc.         Line Nbr.       Item Name         Line Nbr.       MillEAGE         Description       Make sure to un-check         This should be a description of what ys       Make sure to un-check         Quantity       Unit Price         50.00       0.575000         EA       Image: Delivery Instructions         Delivery Instructions       Asset Location Code         P.R. Line Fiscal Year:       2016         Click save       Save	Acct. Dist. View Expand © Close
Add Line     Add Acct.     Add Fav.          ∎Dup          ∑Delete	ve X Cancel

-			tion - Galax						-		-	NR ANDO	
enu N			irchas	e R	lequi								6
Search	Details	; Ite	ms Not	es	Approv	vals	Cost Distril	bution					<b>**</b>
Vendor:	STEPHA	NIE SLA	GAN				Fi	scal Year: 2	016	P.R. Numbe	er: R0000NEW		Acct. Dist.
Show	Descrip	tion	Edit Des	iC.	Dis	count A	<b>mt:</b> 0.00	Pct: 0	.000000	Freight An	nt: 0.00	View Exp	and C Close
Line Nbr.	P.R. Lir Fiscal Y		n Name		Des	cription		Quantity	Unit Price	илм	Int Discount	Discount Amount Freight	Freight Amount Tax
0001	2016		EAGE				oe a descripti	50.00		EACH	Dioaco no	ote that the a	
	Fund	School BSV	Resource 0000	PY 4	Goal 6720	Function 0000	n Object 5220	Amount 0.00	Perc 1.0000				
		DUV	0000	4	0720	0000	Total:	0.00	1.0000		line au	to populates	5
										Total:	75	0.00	0.00
•	1				1.6								144
dd Lin	A A	dd Ao	ct. Ac	ld Fa	av.	Du	p / C	Delete				C Save	X Cancel

Search	earch Details Items Notes Once you are done adding lines, Click Notes														
Vendor:	STEPHANIE SLAGAN Fiscal Year: 2016 P.R. Number: R0000NEW													Acct. I	Dist.
Show	Descri	iption	Edit Des	iC.	Dis	scount A	mt: 0.00	Pct: 0.00	10000 F	reight Amt: 0	.00	1		ew Expand O C	lose
Line Nbr.	P.R. L Fiscal <sup>v</sup>	ine r'ear Item	n Name		Dea	scription			Quantity	Unit Price	0/м	Amount I	Discount	Discount Amount	▲ Freig
	201	6 MIL	EAGE		Thi	s should b	e a descripti	ion of what your ar	e 50.00	0.575	EACH	28.75	N	0.00	N
	Fund	School	Resource	PY	Goal	Function	Object	Amount	Percent	Acct. Amount					
	11	BSV	0000	4	6720	0000	5220	0.00	1.000000						
							Total:	0.00	1.000000						
■ 0002	201		R DIEM				FOR 1/21/		1.00	12.00	EACH	12.00	N	0.00	N
	Fund	School BSV	Resource			Function	Object 5220	Amount	Percent 1.000000	Acct. Amount					
		857	0000	4	6720	0000	5220 Total:	0.00	1.000000	12.00 12.00					- 1
<b>=</b> 0003	201	6 PEE	I R DIEM		111		1/21/2016	0.00	1.000000	12.00		18.00	N	0.00	N
			Resource	PY		Function		Amount	Percent		EAGH	10.00		0.00	
	11	BSV	0000	4	6720	0000	5220	0.00	1.000000	18.00					
							Total:	0.00	1.000000	18.00					
■ 0004	201	6 PEF	R DIEM		LUI	NCH FOR	1/21/2016		1.00	36.00	EACH	36.00	N	0.00	N
	Fund	School	Resource	PY	Goal	Function	Object	Amount	Percent	Acct. Amount					
•	11	DC17	0000		6720	0000	6000	0.00	1.000000	20.00					•



Once finished, print out a copy of the requisitions and attached it to your travel. A copy will also need to go to the business office, attn.: Stephanie Slagan