

## Creating a Travel Voucher (eForms)- All travel 1/1/16 and later

- **Main Page:**

Within eForms, select Accounting under *Create New Form* and choose Travel (all travel January 1, 2016 and later).

The screenshot shows the eForms main page. On the left is a vertical menu with the following items: Accounting (highlighted in yellow), Cashiering, Fixed Assets/Inventory, Financial Rptg, Purchasing, Spa, and Savable Forms. Below these are links for Search Existing Forms, Form Status, Document Tracking, Vendor Search, Main Menu, My Account, and Support. The main area of the page is a list of forms, each with a blue hyperlink. The last item in the list, "Travel (all travel January 1, 2016 and later)", is highlighted in yellow.

<a href="#">Allocated Budget Transfer</a>
<a href="#">Authorization for Electronic Deposit of Vendor Payment</a>
<a href="#">BPC Account Action Request</a>
<a href="#">BPC Cardholder Dispute Form</a>
<a href="#">Business Procurement Card Voucher</a>
<a href="#">Business Travel Account Voucher</a>
<a href="#">Cash Count</a>
<a href="#">Change Fund Maintenance</a>
<a href="#">Cost Comparison: Airfare Vs. Mileage</a>
<a href="#">DA-06 Lost Warrant Statement</a>
<a href="#">DA-22 Moving Expense Agreement</a>
<a href="#">Delegation of Authority</a>
<a href="#">Domestic Wire Request</a>
<a href="#">Encumbrance Correction</a>
<a href="#">Foreign Travel Per Diem Calculator</a>
<a href="#">Foreign Wire Request</a>
<a href="#">Interfund Voucher</a>
<a href="#">Journal Entry</a>
<a href="#">KSU Encumbrance Form</a>
<a href="#">Miscellaneous Transaction Journal</a>
<a href="#">Non-Allocated Funds Transfer</a>
<a href="#">Pre February 2008 Procurement Card Voucher</a>
<a href="#">Property Damage or Loss Claim</a>
<a href="#">Request For Actual Conference Lodging</a>
<a href="#">Request for Official Hospitality</a>
<a href="#">Request For Out of State Travel</a>
<a href="#">STARS Batch Sheet</a>
<a href="#">STARS Vendor Edit Table Maintenance Form</a>
<a href="#">Subsistence Extension Request</a>
<a href="#">Transfer of Payments</a>
<a href="#">Travel (all travel January 1, 2016 and later)</a>

- **Header Page:**

*User Number:* For departmental use as needed (may leave blank)

*Transaction Date:* Last Day of Business Travel

*Form Title:* For departmental use as needed (may leave blank)

The screenshot shows the eForms Header page for a Travel Voucher. On the left is a vertical sidebar with the following items: Document Number: 803775, Finished (button), Travel Voucher, Fund Total: \$0.00, Mileage Total: \$0.00, Meals Total: \$189.00, Lodging Total: \$0.00, and Other Total: \$0.00. The main area of the page is a form titled "Header Information" with a blue header. It contains three fields: User Number (text input), Transaction Date (date picker set to 8/7/2013), and Form Title (text input). A "Next" button is located at the bottom right of the form.

Header Information	
User Number:	<input type="text"/>
Transaction Date:	8/7/2013 (MM/DD/YYYY)
Form Title:	<input type="text"/>

- **Vendor Page:**

First Search for the vendor. You may need to search by first name only or last name only if unable to locate vendor. Only add a new vendor if the vendor is **not** in the vendor table. In the event the vendor address needs updated (address displayed is not current), select the vendor from the vendor table, select Edit Vendor and type in the new address in place of the old. Review the last four digits of the social and the address with the employee to verify you are paying the correct individual as we may have someone in the database with the same name.

Document Number: 803775

Finished

Travel Voucher

Fund Total: \$0.00

Mileage Total: \$0.00

Meals Total:

Lodging Total:

Other Total:

Header Vendor **Agency** Travel Detail Funding Flags Trustees Final Form

**Vendor Information**

New Vendor Edit Vendor **Search**

Vendor ID:

Vendor Site ID:

Payment Indicator:

Vendor No/Sfx:

Vendor Name:

Address:

City:

State:

Zip:  -

Country:

Next

HINT: Always Search for vendor before adding a new vendor. You made need to search by a portion of the name. REQUEST TRAVELER TO VERIFY ADDRESS AND LAST FOUR OF THE SOCIAL SECURITY NUMBER.

- **Agency Page:**

*Department Name:*

*Building:*

*Phone:*

*Traveler's Position:* Position Title

*Office Location:* Official Work Station Location (as reflected in HR)

Document Preparer:

Dept Name:

Building:

Phone:

Traveler:

Traveler's Position:

Office Location:

City, State

Home Location:

City, State

Use Saved Information Save This Information

Next

- **Travel Detail:**

**General:**

***Departure/Return Time:***

The time must be entered in an HH:MM format, selecting a.m. or p.m. as appropriate. The Departure Time is the time the traveler left their official work location or domicile, whichever is less. The Return Time is the time the traveler returned to their official work location or domicile, whichever is less.

***Out-of-State Travel Order No:*** Must be supplied when selecting Out-of-State, Out-of-State High, Out-of-State Special High, and International. This document may be found in Eforms and is to be completed prior to the traveler booking travel or registration.

Select the travel destination category, state and location for the business travel. Enter the date in MM/DD/YYYY format. You may also use the calendar to select the date. Click “Add” to create the destination. If your traveler has multiple travel destinations, add additional lines as needed. The From date is the date the traveler departed to go to the location and the To date is the date the traveler ended travel at that location. See the example below. Dates will overlap for multi-destination consecutive travel as you will depart and arrive at different locations on the same day.

**General**

[Event](#)

[Meals & IE](#)

[Lodging](#)

[Summary](#)

[Mileage](#)

[Other](#)

**Travel Period:** These are the dates of travel. What you enter here will be used in the rest of these screens to help you provide details about the trip.

Departure Time: 07:00 ☒ a.m. ☐ p.m.

Return Time: 05:00 ☐ a.m. ☒ p.m.

Out-of-State Travel Order No.: 1122334

Date will overlap for multi-destination consecutive travel.

Category	State	Location	From	To	Action
Contiguous United States	Massachusetts	Boston	1/4/2016	1/7/2016	Edit Delete
International	United Kingdom	Edinburgh	1/7/2016	1/12/2016	Edit Delete
Contiguous United States	Indiana	Alexandria	1/12/2016	1/14/2016	Edit Delete
Contiguous United States	Kansas	Abilene			Add

Continue

**Event:**

***Purpose of Travel (Event):*** KSU Business Purpose and event name

***Event Dates:*** Official dates of the event, often different from departure/return dates.

***Comments:*** Any additional information that will assist in explaining details of the trip not clearly defined by the substantiation provided.

[General](#)

**Event** Purpose of Travel (event):

[Meals & IE](#) Travel Forum Extravaganza/International  
Travel Training/Travel Conference

[Lodging](#) Event Dates: 01/05/2016 to 01/13/2016

[Summary](#)

[Mileage](#)

[Other](#)

Meals & IE:

*Per Diem Claiming:* Check the box that corresponds to what the traveler is claiming. In most cases it will be the max reimbursable amount.

*Meals Provided at no cost:* Provide the quantity of each meal included or provided for the traveler at no cost during his/her business travel. It is important to mark the correct day for each meal that was provided so that the traveler is correctly reimbursed.

*Personal Time (hours):* Enter time in number of hours for personal days or time taken during business travel. For example, if one personal day is taken, enter 24 hours. If for example personal time is taken from 5:00 pm until 8:00 am the following morning, you would enter 7 hours for day 1 and 8 hours for day 2. Note personal time in the comments.

[General](#) ☒ Max reimbursable

[Event](#) Per diem claiming: ☐ Custom

[Meals & IE](#) ☐ None

Date	Destination	Meals provided at no cost	Personal Time (hours)
1/4/2016	Boston, Massachusetts	<input type="checkbox"/> B <input type="checkbox"/> L <input type="checkbox"/> D	0
1/5/2016	Boston, Massachusetts	<input checked="" type="checkbox"/> B <input type="checkbox"/> L <input type="checkbox"/> D	0
1/6/2016	Boston, Massachusetts	<input checked="" type="checkbox"/> B <input checked="" type="checkbox"/> L <input type="checkbox"/> D	0
1/7/2016	Edinburgh, United Kingdom	<input type="checkbox"/> B <input type="checkbox"/> L <input checked="" type="checkbox"/> D	0
1/8/2016	Edinburgh, United Kingdom	<input type="checkbox"/> B <input checked="" type="checkbox"/> L <input type="checkbox"/> D	0
1/9/2016	Edinburgh, United Kingdom	<input type="checkbox"/> B <input checked="" type="checkbox"/> L <input type="checkbox"/> D	0
1/10/2016	Edinburgh, United Kingdom	<input checked="" type="checkbox"/> B <input type="checkbox"/> L <input type="checkbox"/> D	7
1/11/2016	Edinburgh, United Kingdom	<input type="checkbox"/> B <input type="checkbox"/> L <input type="checkbox"/> D	8
1/12/2016	Alexandria, Indiana	<input checked="" type="checkbox"/> B <input type="checkbox"/> L <input type="checkbox"/> D	0
1/13/2016	Alexandria, Indiana	<input type="checkbox"/> B <input type="checkbox"/> L <input type="checkbox"/> D	0
1/14/2016	Alexandria, Indiana	<input type="checkbox"/> B <input type="checkbox"/> L <input type="checkbox"/> D	0

**Comments:**

Personal time taken from 5:00 pm on 1/10/16 to 8:00 am on 1/11/16.

Lodging:

**Destination:** Destination location for that day. This is prepopulated based on the information provided on the General page. The destination is based on the location the traveler will be lodging for that day. Please note that the return trip back to the traveler's official station is listed as the last business destination.

**Lodging Name:** If traveler did not incur lodging expenses type "Not Claiming". If lodging was paid for on BPC, type "BPC" and leave amount column blank. NOTE: If the lodging amount entered is higher than the maximum allowable daily amount, a message will pop up as you continue reminding you to verify the base rate of the room is less than the maximum allowable amount. In the event it is NOT, you must provide a Request for Actual Conference Lodging with substantiation showing the conference event location and conference rate or a cost comparison in relation to other lodging in the same area.

Date	Destination	Lodging	Amount
1/4/2016	Boston, Massachusetts	Hotel	180
1/5/2016	Boston, Massachusetts	Hotel	180
1/6/2016	Boston, Massachusetts	Hotel	180
1/7/2016	Edinburgh, United Kingdom	Hotel	230
1/8/2016	Edinburgh, United Kingdom	Hotel	230
1/9/2016	Edinburgh, United Kingdom	Hotel	230
1/10/2016	Edinburgh, United Kingdom	Personal Time	0.00
1/11/2016	Edinburgh, United Kingdom	Hotel	0.00
1/12/2016	Alexandria, Indiana	Hotel	120
1/13/2016	Alexandria, Indiana	Hotel	120
1/14/2016	Alexandria, Indiana		

Previous Continue

**Comments:**  
Personal time taken from 5:00 pm on 1/10/16 to 8:00 am on 1/11/16.

Summary:

The amounts reflected are automatically calculated from the information you supplied on the previous pages. To make changes to the data entered, return to the appropriate page and make adjustments.

The reduction amounts have been provided for you in a view-only manner. The links to review per diem rates are included as well as the percentage reduction for meals provided, and the calculation formula for the maximum reimbursable M&IE rate.

Additional adjustments to M&IE and Lodging rates may be made in this screen or the M&IE and Lodging sections. You may not enter more than the calculated maximum M&IE rate.

[General](#)  
[Event](#)  
[Meals & IE](#)  
[Lodging](#)  
[Summary](#)  
[Mileage](#)  
[Other](#)

[Contiguous United States \(CONUS\)](#)  
[Outside Contiguous United States \(OCONUS\)](#)  
[International Locations](#)  
  
Breakfast, Lunch, and Dinner are reimbursed at 15%, 35%, and 50% of the daily M&IE amount.  
The maximum reimbursable M&IE amount is:  
[Base M&IE Rate] \* [Quarter Adjustment] \* (1 - [Meals Adjustment])  

Date	Destination	Base M&IE Rate	Quarter Adjustment	Meals Adjustment	M&IE	Lodging
1/4/2016	Boston, Massachusetts	\$69.00	0.75	0.00	51.72	180.00
1/5/2016	Boston, Massachusetts	\$69.00	1.00	0.15	58.65	180.00
1/6/2016	Boston, Massachusetts	\$69.00	1.00	0.50	34.50	180.00
1/7/2016	Edinburgh, United Kingdom	\$110.00	1.00	0.50	55.00	230.00
1/8/2016	Edinburgh, United Kingdom	\$110.00	1.00	0.35	71.50	230.00
1/9/2016	Edinburgh, United Kingdom	\$110.00	1.00	0.35	71.50	230.00
1/10/2016	Edinburgh, United Kingdom	\$110.00	0.75	0.15	70.13	0.00
1/11/2016	Edinburgh, United Kingdom	\$110.00	0.75	0.00	82.50	0.00
1/12/2016	Alexandria, Indiana	\$51.00	1.00	0.15	43.35	120.00
1/13/2016	Alexandria, Indiana	\$51.00	1.00	0.00	51.00	120.00
1/14/2016	Alexandria, Indiana	\$51.00	0.75	0.00	38.25	0.00

Previous

Continue

Mileage:

*State Vehicle No:* Enter tag number of state vehicle, if used.

*Current Mileage Rate:* Select applicable rate from the drop down menu (only needed for privately owned transportation)

*Date:* Select Date that mileage occurred and “Add” as needed for each date mileage is being claimed (only needed for privately owned transportation).

Document Number:  
803775  

Finished

Travel Voucher  

Fund Total:  
\$0.00  

Mileage Total:  
\$0.00  

Meals Total:  
\$170.75  

Lodging Total:  
\$0.00  

Other Total:  
\$0.00

[Header](#)[Vendor](#)[Agency](#)[Travel Detail](#)[Funding](#)[Flags](#)[Trustees](#)[Final Form](#)

[General](#)  
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[Mileage](#)  
[Other](#)

**Mileage:** Describe the mileage to be reimbursed for private vehicles. If a state vehicle was used no mileage can be claimed. Mileage rate must be set to blank to enter a vehicle number.  
[MapQuest](#) - [KDOT Distance Chart](#)

State Vehicle No:

Current Mileage Rate: .56 - Current FY 14 Privately Owned Auto

Mileage Per Day:

Date	Miles	Vicinity Miles	Amount	Edit	Remove
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Previous

Continue

**Comments:**  
Shuttle to/from Airport included in conference registration.

Next

Other:

**Other Amount:** Individual amount of any additional business expenses not included in prior sections paid for by the traveler.

**Description:** Brief description of item (i.e. tolls, shuttle, airfare, rental car, tax, etc.)

**BPC Documents:** List the document number of any BPC document that includes expenses related to the travel voucher.

The screenshot shows the 'Other' section of a travel voucher form. On the left, a sidebar displays the document number 803775 and a 'Finished' button. Below this, a 'Travel Voucher' summary lists totals: Fund Total (\$0.00), Mileage Total (\$145.60), Meals Total (\$189.00), Lodging Total (\$0.00), and Other Total (\$5.50). The main area has tabs for Header, Vendor, Agency, Travel Detail, Funding, Flags, Trustees, and Final Form. The 'Other' tab is active, showing a text area for 'Other: Describe other expenses...' and a table for 'BPC Documents' with columns for Airfare, Rental Car, Lodging, and Other. A 'Comments' section at the bottom contains the text 'Shuttle to/from Airport included in conference registration.' and a 'Next' button.

Funding:

Use either your saved funding or enter your funding string (boxes Order No, Line, and M are only for prior year encumbered payments).

The screenshot shows the 'Funding' section of the travel voucher form. The sidebar on the left is identical to the previous screenshot. The main area has the same tabs, with 'Funding' now active. It features a 'Funding Information' section with an 'Add Line:' button and a 'Saved Funding:' dropdown. Below this is a table with columns: Order No, Line M, Amount, Project, Award, Source Org, and Object. An 'Edit Line:' button is also present. A 'Next' button is located at the bottom right.

### Flags:

Click on any of the applicable flags to further clarify expenses being reimbursed on voucher.

Document Number: 803775

Finished

Travel Voucher

Fund Total: \$0.00

Mileage Total: \$145.60

Meals Total: \$189.00

Lodging Total: \$0.00

Other Total: \$5.50

Header Vendor Agency Travel Detail Funding **Flags** Trustees Final Form

**Flags**

Choose a maximum of three phrases to be stamped on your form

- ☐ 1. An obligation of sponsored research project K.S.A. 76-752 and/or 76-770 exemptions apply.
- ☐ 2. Our Department has confirmed that the expenses noted above were funded by the traveler.
- ☐ 3. Funds Collected for this Purpose.
- ☐ 4. Institutional Membership not available.
- ☐ 5. Student Government Association
- ☐ 6. SPA grant allows for payment of food.
- ☐ 7. Additional conference expenses were an integral part of the conference and professional development experience.

Next

### Trustees:

This will show any trustee who currently has access to your voucher. You may add additional trustees as needed.

### Final Form:

Click "View Final Form" to view your document for accuracy. Print document, attach receipts and other substantiation, obtain original signatures and forward completed voucher to 220 Anderson Hall for processing.

Document Number: 803775

Finished

Travel Voucher

Fund Total: \$0.00

Mileage Total: \$145.60

Meals Total: \$189.00

Lodging Total: \$0.00

Other Total: \$5.50

Header Vendor Agency Travel Detail Funding **Final Form**

[View Form](#) [View Signature Sheet](#)

Next