TRAVEL

What to do when the journey ends
OBJECTIVES

To review the following and provide a better understanding of what is needed, when and why:

- FORMS
- CODES
- RENTAL CARS
- RESOURCES
- QUESTIONS
FORMS

• Out of State Travel Request Form (OSTR)
• Travel Reimbursement Form
• Actual Conference Lodging Form (ACL)
• Cost Comparison
Out of State Travel Request Form (OSTR)

The information in Section 1 should be provided to the Office of International Programs prior to a KSU employee leaving for international business travel so that they may track them in the event of an emergency.
## Section 2

**TRANSPORTATION EXPENSES**

- [ ] Private Car
- [ ] State Vehicle
- [ ] Motor Pool
- [x] Other
  - **Airfare**
  - **Rental Car**

<table>
<thead>
<tr>
<th></th>
<th>Amount</th>
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<tr>
<td><strong>Private Car</strong></td>
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<tr>
<td><strong>State Vehicle</strong></td>
<td>$0.00</td>
</tr>
<tr>
<td><strong>Motor Pool</strong></td>
<td>$0.00</td>
</tr>
<tr>
<td><strong>Other</strong></td>
<td>$352.00</td>
</tr>
</tbody>
</table>

**OTHER EXPENSES**

- **Meals** - No. of Days: 6.00
  - Rate Per Day: 50.00
- **Lodging** - No. of Days: 5.00
  - Rate Per Day: 150.00
- **Registration Fee - Explain:**
- **Miscellaneous Costs - Explain:** Taxi

<table>
<thead>
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<th></th>
<th>Amount</th>
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<tbody>
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<td><strong>Transportation</strong></td>
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<td><strong>Meals</strong></td>
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<td><strong>Lodging</strong></td>
<td>$750.00</td>
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<tr>
<td><strong>Registration Fees</strong></td>
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<tr>
<td><strong>Misc. Cost</strong></td>
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**KSU Account(s) Funding travel**

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<tr>
<th>Project Name</th>
<th>Project Number</th>
<th>Amount</th>
<th>Optional -- Dept. Acting</th>
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</thead>
</table>

**Name of Other KSU Travelers / Department:**

______________________________

**Approval Requested By:**

______________________________

**Date:**

______________________________

**Department Authorized Signature:**

______________________________

**Date:**

The completed form is to be maintained on file in the authorizing official’s office for five years. The authorized signature and traveler cannot be the same person.

**ADMINISTRATION STAFF:** Please send a copy of SECTION TONEY to the Office of International Programs for all International Travel.
### TRAVEL PAYMENT VOUCHER

**User No. 6012**

**Document No.** 1861680 R 47

**Department:** Division of Financial Services

**Building:** Unger Complex

**Phone #:** (785) 532-1839

**Position:** Supervisor

**Official Station:** Manhattan, KS

**Regular Domicile:** Manhattan, KS

**Travel Period:** 8/3/2018 - 8/10/2018

**Travel Order #:** 999999999

---

#### SMART

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<th>Dept</th>
<th>Fund</th>
<th>FY</th>
<th>Brgy</th>
<th>Unit</th>
<th>Prog</th>
<th>Acct</th>
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**Doc. Total:** 1,492.13

#### Purpose of Travel (event): 2018 Travel Conference

**Event dates:** 8/4/2018 - 8/9/2018

**Meals:** B: 3 L: 3 D: 2

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#### Lodging

<table>
<thead>
<tr>
<th>Date</th>
<th>Departure Time</th>
<th>Return Time</th>
<th>Miles</th>
<th>Destination</th>
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<td>Hilton</td>
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</table>

**Other Expense:**

- 120.00 Shuttle
- 6.00 Tolls
- 45.00 Parking
- 42.50 Uber
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<th>State Veh.</th>
<th>Total Miles</th>
<th>X Rate per Mile</th>
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<tr>
<td></td>
<td>24.00</td>
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**Document Totals**
- 143.69
- 336.75
- 825.00
- 219.50
- **Document Total**: 1,492.13

**BPC Documents**
- Registration: 1876593
- Airfare: 1886574
- Lodging:
- Rental Car:
- Other:

Our Department has confirmed that the expenses noted above were funded by the traveler. All travel expenses being claimed by the traveler or paid on other vouchers are noted above.

**Comments**
- Shuttle to/from Destination Airport & Lodging
- Uber to/from business dinner with conference hosts

**Claimant Certification**
I certify that the above claim is correct, due and unpaid, and that the amount claimed herein is actually due according to law.

**Departmental Approval**

**Agency Payment Certification**
I certify that the travel and expenses within was duly ordered, on official state business, under authority of law, and the amount herein is correct and is unpaid.

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An Equal Opportunity Employer

1867680 E 47
REQUEST FOR ACTUAL CONFERENCE LODGING

INSTRUCTIONS

1. Complete the requested information below.

2. The Division of Financial Services must be provided with conference materials indicating that the conference will be held at or in connection with a lodging establishment with rates exceeding the applicable lodging expense limitation. The materials must also indicate the rates for lodging.

3. Submit the original form to the Division of Financial Services prior to travel.

4. Attach the approved original copy of the request to the payment voucher submitted for payment for lodging.

Return Form to:

Name: ____________________________
Dept: ____________________________
Bldg: ____________________________

(Please Type or Print)

Agency Name: Kansas State University Agency No: 36700
Employee Name(s): ........................................

...........................................................

Name of Conference and Venue: ________________________________

...........................................................

Location of Conference (City, State, Lodging establishment): ______________

...........................................................

Dates of Conference: ________________________________

...........................................................

Conference Daily Rate of Lodging (attach substantiation showing rate): ________________________________

...........................................................

DEPARTMENTAL APPROVAL

_________________________  __________________________
Department Head          Date

AGENCY APPROVAL:
I certify that I have reviewed the conference materials and verified that the lodging establishment rates exceed the allowable limitations.

_________________________  __________________________
Agency Head               Date
TRAVEL COST COMPARISON WORKSHEET
For Instructions see PFM 6410.050

Traveler________________________ Date Out-of-State Travel Requested_________________

AIRCARE VS. MILEAGE (For business travel to a destination over 400 miles)

AIRCARE:
- Mileage from official station or domicile to the nearest airport (round-trip)*
  Allowance per mile $0.545 = $_________ □

- Mileage from destination airport to lodging establishment (round-trip)*
  Allowance per mile $0.545 = $_________ □
  Or
  Designated Shuttle/Taxi Fee (round-trip)*
  $_________ □ 0

- Mileage between lodging establishment and event (× Number of days)*
  Allowance per mile $0.545 = $_________ □
  Or
  Taxi/Public Transportation Fee*
  $_________ □ 0

- Airport Parking/Tolls
  $_________ □

- Round trip economy airfare from the nearest airport to the airport nearest the destination*
  $_________ □

TOTAL AIRFARE (sum of checked items) $_________ 0.00

MILEAGE:
- Round trip mileage*
  Allowance per mile $0.545 = $_________ 0.00

- Mileage between lodging establishment and event*
  Allowance per mile $0.545 = $_________ 0.00

- Parking/Tolls (provide original receipts)
  $_________ □

TOTAL MILEAGE $_________ 0.00

*Provide backup documentation (Mapquest/Airfare quote) for expense noted and attach with this form.
*Whichever is most economical.

ADDITIONAL INFORMATION:
TRAVEL CODES

E2511, E2512, E2513  Private Vehicle Mileage
E2521, E2522, E2523  Rental Car
E2531, E2532, E2533  State Car Expense
E2571, E2572, E2573  Air, Rail, & Bus Fares
E2581, E2582, E2583  Meals and Lodging
E2591, E2592, E2593  Non Subsistence Items
E2661  Conference Registration
E2010  Postage
E3690  Supplies
RENTAL CARS

• Effective TODAY (11/01/2018) Enterprise is the State contract provider of rental cars

• Point of contact for billing questions, invoice requests, and adjustments
  – sokenterprisehelp@ehi.com.

• Benefits Include but are not limited to:
  – Traveler pick-up and vehicle delivery services
  – No additional cost for compact car and sedan rentals for travelers aged 18-20 for in state use.
  – KSU employees are afforded the opportunity to receive discounts on personal rentals.
  – 24 Hour Emergency Roadside Assistance is available by calling 1-800-307-6666
  – Three accounts offered to meet vehicle size and insurance needs.
    • BUSINESS ACCOUNT (EXCLUSIVE) #: XZ51KSU
    • BUSINESS ACCOUNT (INCLUSIVE) #: XZ51KSC
    • LEISURE ACCOUNT #: XZ51KSP

• For more details and additional information please visit Enterprise’s table at the Vendor Fair
RESOURCES

- Links to the following are available on the General Accounting site @
  - [http://www.k-state.edu/finsvcs/generalaccounting/travel.html](http://www.k-state.edu/finsvcs/generalaccounting/travel.html)
- **Policy and Procedures Manual** - Chapter 6410 Reimbursable Travel Expenses and Forms
- **Travel Voucher Creation**
- **Travel Rates**
  - Contiguous United States (CONUS)
  - Outside Contiguous United States (OCONUS)
  - International Locations
- **Other Helpful Links**
  - Airfare (Short's Travel)
  - Fly America Act: Code Share
  - Rental Car
  - Mileage
  - State and County Search
  - Currency Conversion
  - Tolls
  - Taxi Calculator
QUESTIONS