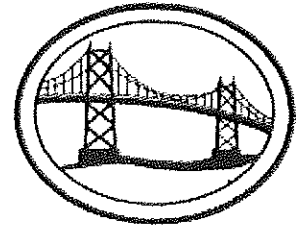


Ogdensburg Bridge and Port Authority Governance Policies



Subject: Travel & Miscellaneous Expense Reimbursement
Adopted: September 10, 2014

TRAVEL & MISCELLANEOUS EXPENSE REIMBURSEMENT

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SECTION 1.0 GENERAL POLICY

1. The purpose of this policy is to provide for 1) reimbursement of allowable travel expenses incurred when business is conducted away from the Authority official duty station; and 2) reimbursement of certain other expenses.
2. This policy applies to the Board of Directors and all employees of the Authority.
3. Travelers are required to obtain advance approval for any overnight travel deemed necessary for the conduct of Authority business. Such approval must be obtained from the Chairman or Executive Director, as provided herein, and be documented by the completion of the Training and Travel Authorization Form (Attachment # 1). The Chairman approves travel by Board Members and the Executive Director. The Executive Director approves travel by all other employees.
4. Only business expenses which are determined to be reasonable and necessary will be eligible for reimbursement. Charges to corporate credit cards, travel advances, or reimbursable expenses shall be consistent with Authority policy.
5. To obtain reimbursement, all reimbursement requests must include an Expense Report (Attachment # 7), original receipts and such supporting documentation as required by this policy. Reimbursement requests must be submitted to the immediate supervisor within a reasonable period of time after the expenses are incurred.
6. Expenses incurred for Authority business within NYS are exempt from state and local sales and use tax. When traveling within this State, travelers must complete Form ST-129, Exemption Certificate, for tax on occupancy of hotel rooms (Attachment # 6). State and local sales taxes will not be reimbursed.
7. The traveler is responsible for the accuracy and completeness of any travel expense documentation submitted. Such requests should include the following information:
 - a. distance traveled,
 - b. points of travel (to – from),
 - c. purpose of travel,
 - d. dates of trip,
 - e. itemized listing of expenditures, with receipts (as required), and
 - f. such other supporting documents as necessary.

The Expense Report (Attachment # 7), should be utilized by employees for this purpose. For Board members, the Board of Directors Expense Form (Attachment # 8), shall be used. Reimbursement requests for overnight travel must be accompanied by a copy of the Travel Authorization Form.

8. A traveler is in travel status and eligible for reimbursement of travel expenses when on official business more than 35 miles from both the official station and place of residence. The official station is the employee's usual work location.

SECTION 2.0 IN-SERVICE AREA TRAVEL (NON-TRAVEL STATUS) - MILEAGE

When an employee is assigned to work at an alternate work location which is 35 miles or less from either his or her official station, the employee is not considered to be in travel status, but rather is considered to be traveling in proximity of his or her official station. When traveling in proximity of home or official station, an employee using a personal vehicle, is, as outlined below, entitled to reimbursement of transportation expenses associated with travel:

- from home to an alternate work location
- between the official station and an alternate work location
- between alternate work locations
- from an alternate work location to the employee's home

When travel is from an employee's home to an alternate work location, or from an alternate work location to home, transportation expenses will be reimbursed using the lesser of (1) mileage between the employee's home and the alternate work location, or (2) mileage between the employee's official station and the alternate work location, times the Internal Revenue Service mileage reimbursement rate. This reimbursement method is called the "lesser of mileage rule." When travel is between an employee's official station and an alternate work location, or between two or more alternate work locations, transportation expenses must be reimbursed by payment for the actual mileage between such locations, times the Internal Revenue Service mileage reimbursement rate.

Reimbursement for transportation costs between the official station and the traveler's residence is not allowed, except in the case of designated vehicles, as detailed by the Authority's Motor Vehicle Safety Policy.

SECTION 3.0 IN-SERVICE AREA TRAVEL (NON-TRAVEL STATUS) – MEALS

1. Employees traveling on Authority business, for the purposes of professional seminars and training, project development or customer development, but not in travel status (35 miles or less from home and official work station) as defined by Section 1.8. of this policy, will be reimbursed the maximum meal allowance for breakfast, lunch and dinner found on the United States General Services Administration (GSA) website (Meal Allowance Breakdown). Travelers will be reimbursed for breakfast, providing the employee leaves home at least one hour prior to normal departure time; for lunch, providing the employee is away from their work station; for dinner, providing the employee returns home at least two hours after normal return time.
2. Employees called out to respond to emergency alarms, repairs or customer service during non-scheduled work hours may request appropriate meal reimbursement upon the recommendation of the Supervising Manager and subject to the approval of the Executive Director.
3. At the discretion of Authority management, working lunches may be scheduled from time to time at the convenience of the Authority. Working lunches may be reimbursed when there is a documented business purpose for such a meal. Such approval must be obtained in advance, as provided herein, and be documented by the completion of the Working Lunch Authorization Form (Attachment # 2).

SECTION 4.0 LODGING WHILE ON TRAVEL STATUS

1. The Authority uses the per diem rates for travel reimbursement that have been established by the United States General Services Administration (GSA), which is consistent with the policy of the New York State Office of the State Comptroller (OSC) (NYS Office of State Comptroller). The maximum travel per diem rates for the continental United States are available at the General Services Administration Office of Government wide Policy Website (Per Diem Rates).

The Authority will utilize the GSA standards. When the GSA standards change, the Authority's policy will remain consistent with the GSA standards.

In the event the Office of the State Comptroller establishes reimbursement rates or standards different from the GSA, the OSC guidelines will be the basis of the Authority policy.

The Executive Director may grant a waiver to these rates if there are circumstances that justify the need to exceed these rates.

2. In cases where a substantial number of Board Members may be engaged in overnight travel, a budget shall be put together in advance, and authorized by the Board of Directors.
3. Reimbursement is limited to room, parking, hotel meals, business phone calls, and one phone call home per day, which should be kept to a reasonable length. Hotel receipts for overnight travel must be submitted to substantiate the per diem meal reimbursement.
4. Expenses for a spouse, family members or friends who accompany the employee are not reimbursable. Any incremental expenses resulting from a guest (i.e., increased room charge over single occupancy, additional meal charges) should be deducted from the expense reimbursement report.
5. An exemption certificate for tax on occupancy of hotel rooms must be presented upon check-in (Attachment # 6). New York State sales and use taxes will not be permitted.

SECTION 5.0 MEAL REIMBURSEMENT WHILE ON TRAVEL STATUS

1. When in travel status, travelers will be reimbursed for breakfast when travel begins at least one hour before their normal work starting time, and for dinner when returning home at least two hours after their normal work ending time. The maximum meal allowance breakdown for breakfast, lunch and dinner can be found on the United States General Services Administration (GSA) website (Meal Allowance Breakdown). Different meal allowances are based on location. Locations can be found on the United States General Services Administration (GSA) website (Per Diem Rates).
2. For partial days of travel, the maximum meal allowance breakdown for breakfast, lunch and dinner can be found on the United States General Services Administration (GSA) website (Meal Allowance Breakdown).
3. The Executive Director has the authority to grant per diem advances.

SECTION 6.0 TRANSPORTATION EXPENSES WHILE ON TRAVEL STATUS

Travel should be by the most efficient and cost effective method of transportation available. All travel assignments shall be scheduled to minimize expenses whenever possible.

Actual travel costs will be reimbursed from origin to destination, in accordance with the following guidelines:

6.1 Personal Automobile

When possible, designated or pool vehicles (see Motor Vehicle Safety Policy) shall be used for travel. Mileage for use of a personal automobile while traveling for Authority business will be reimbursed using the latest IRS standard mileage rate (Publication 463). This mileage rate covers gasoline, oil, maintenance, repairs, insurance and vehicle registration. Parking costs and tolls are reimbursable when substantiated by receipts. Citations for violation of parking or vehicle and traffic laws incurred while on Authority travel will not be reimbursed.

6.2 Air Transportation

When traveling by air, approval in advance is required, and travelers should obtain the lowest cost coach accommodations possible. The passenger's portion of the airline ticket or the original transportation receipt must be attached to the travel expense report. Boarding passes alone are not acceptable. **Parking Fees/Tolls/Mileage:** The cost of tolls, parking and mileage related to air transportation is reimbursable (i.e., travel to and from airport). Receipts must be provided.

6.3 Public Transportation

The cost of travel by bus or train is reimbursable when documented by original, itemized receipts. **Parking Fees/Tolls/Mileage:** The cost of tolls, parking and mileage related to train or bus travel is reimbursable (i.e., travel to and from train or bus station). Receipts must be provided.

6.4 Rental Car

Rental car and gasoline expenses are reimbursable, when documented by original, itemized receipts. Employees are expected to rent mid-size or smaller vehicles.

6.5 Taxi Fares

Reasonable taxi fares will be reimbursed, and customary tipping will be allowed. Receipts should be provided.

SECTION 7.0 OTHER REIMBURSEMENTS

1. The Authority recognizes that for developmental purposes and to remain abreast of best practices and current issues, employees may need to attend training seminars or workshops, join professional associations, or pursue other educational opportunities eligible for tuition reimbursement (See Training & Development Policy).
2. As approved by the Executive Director, as appropriate, other reimbursements for training, professional memberships and education may be provided, and it will be determined whether these constitute taxable income on a case by case basis. If determined taxable, such information will be forwarded to the Accounting office upon approval.
3. Such training, professional membership or other education should have a direct relationship to the Authority job the employee performs, or to the employee's developmental plan.

SECTION 8.0 NON-REIMBURSEABLE EXPENSES

1. Only travel expenses that are considered reasonable and necessary in the performance of Authority business are reimbursable. Therefore, the following expenses are not reimbursable:
 - a. accommodations and/or meals that are provided to employee at no cost, or included as part of a reimbursable registration fee,
 - b. alcoholic beverages,
 - c. in-room movies,
 - d. souvenirs,
 - e. entertainment,
 - f. frequent flyer membership fees,
 - g. personal phone calls in excess of reasonable calls home,
 - h. rental vehicle upgrades,
 - i. optional travel or rental car insurance,
 - j. laundry/valet service,
 - k. hotel health club or spa fees,
 - l. clothing and toiletries,
 - m. guest expenses, and
 - n. any other personal expenses not necessary to conducting Authority business.

2. Any such non-reimbursable expenses incurred while traveling on Authority business should **not** be included on the Expense Report form when requesting reimbursement.

SECTION 9.0 SUBMISSION OF CLAIMS

1. Travelers must complete the Expense Report form (Attachment # 7) or the Board of Directors Expense Form (Attachment # 8) in order to be reimbursed for any qualified travel or miscellaneous expenses as described in this policy.
2. All reimbursable expenses must be documented by original receipts.
3. The original approved form will be forwarded to the Compliance Officer for review and filing. A copy of the original Travel Authorization Form, Working Lunch Authorization Form, Miscellaneous Expense Authorization Form, Education Reimbursement Authorization Form, or Training Authorization Form indicating pre-approval will be forwarded to the originator, by the Compliance Officer, and will be attached to the Expense Report, along with all necessary receipts, for payment. Those individuals approving Expense Reports will compare the pre-approval forms with the actual expenses for reasonableness. The Compliance Officer will randomly review the pre-approved forms and the actual expenses for reasonableness, and discuss any discrepancies with the Supervising Manager and/or the Executive Director.

Implementation Procedure for Employee Travel & Miscellaneous Expense Reimbursement

1. Travel Authorization: The Training and Travel Authorization Form (Attachment # 1) must be completed and approved **in advance** of any overnight travel.
 - a. For Board Member or Executive Director travel, approval is required from the Chairman.
 - b. For all other employee travel, the Training and Travel Authorization Form should be submitted to the Executive Director for approval.
 - c. The original Training and Travel Authorization Form will be retained by the Compliance Officer, along with copies of any supporting documentation such as registration form, hotel reservation confirmation, airline confirmation, GSA per diem rates for lodging and meals, etc.
 - d. A copy of the original, approved Training and Travel Authorization Form must be submitted with the request for reimbursement.
2. Working Lunch Authorization: Reimbursement for any working lunch must be approved **in advance**. The Working Lunch Authorization Form (Attachment # 2) is required in order to obtain reimbursement.
 - a. Requests require approval by the Executive Director.
 - b. The original Working Lunch Authorization Form will be retained by the Compliance Officer, along with copies of any supporting documentation, such as invoice/receipt.
 - c. A copy of the original, approved Working Lunch Authorization Form must be submitted to Accounts Payable to be attached to the requisition form that is prepared prior to purchase on a Purchase Card.
3. Miscellaneous Expense Authorization: Reimbursement for any professional memberships, NYSDMV on-line defensive driving course, etc., must be approved **in advance**. The Miscellaneous Expense Authorization Form (Attachment # 3) is required in order to obtain reimbursement.
 - a. Requests for such reimbursements for Board Members require approval by the Chairman.
 - b. Requests for reimbursements for all other employees require approval by the Executive Director.
 - c. The original Miscellaneous Expense Authorization Form will be retained by the Compliance Officer, along with any supporting documentation.

- d. A copy of the original, approved Miscellaneous Expense Authorization Form must be submitted with the request for reimbursement.
4. Education Reimbursement Authorization – The Education Reimbursement Authorization Form (Attachment # 4) must be completed and approved **in advance** of starting any college/university course.
 - a. Requests require approval by the Executive Director.
 - b. The original Education Reimbursement Authorization Form will be retained by the Compliance Officer, along with any supporting documentation stating the college/university name, course name/description, semester/year, etc.
 - c. **A copy of the original, approved Education Reimbursement Authorization Form must be submitted with the request for tuition reimbursement at the end of each term along with the final grade.** Per the Authority's Training and Development Policy, Tuition Reimbursement, the employee will be reimbursed 100% of tuition only for achieving a passing grade of "C" or higher. No reimbursement will occur if the grade is "D" or lower. The reimbursement of tuition only shall not exceed the established rates for the graduate and undergraduate levels of the State University of New York tuition schedule.
5. Training Authorization – The Training and Travel Authorization Form (Attachment # 5) must be completed and approved **in advance** of attending any conference/workshop/seminar.
 - a. Requests require approval by the Executive Director.
 - b. The original Training and Travel Authorization Form will be retained by the Compliance Officer, along with any supporting documentation such as conference/workshop/seminar registration form and description, etc.
 - c. If the conference/workshop/seminar is for overnight travel, than a Training and Travel Authorization Form must also be completed, signed and submitted for approval.
 - d. A copy of the original, approved Training and Travel Authorization Form must be submitted with the request for reimbursement.
6. Exemption Certificate – For overnight travel on official business within New York State, the NYS Department of Taxation and Finance Exemption Certificate ST-129 Form (Attachment # 6) must be completed and signed by the employee and submitted to the hotel or motel upon check-in.

7. Expense Reimbursement - Employees: All employee expenses must be submitted by the completion of the Expense Report (Attachment # 7). Give the completed expense report with attached envelope and receipts to your supervisor for approval.
8. Upon completion of the Expense Report, all required supporting documentation (receipts, tickets, etc.) must be provided to the immediate supervisor, along with a copy of the original, signed authorization form.
9. Each Employee submitting an Expense Report for reimbursement is responsible for its accuracy and completeness. Additionally, the signature of approval of the individual's supervisor or director indicates that the expense statement is complete, meets documentation and receipt requirements, includes only reasonable expenses, and is in compliance with the Travel and Miscellaneous Expense Reimbursement Policy.

Expense Reimbursement – Board Members: All Board member expenses must be submitted, on paper, by the completion of the Board of Directors Expense Form (Attachment # 8). Once approved, the form is submitted to Accounts Payable, for processing and payment.

**Attachment # 2
Ogdensburg Bridge and Port Authority
WORKING LUNCH AUTHORIZATION FORM**

Name/Title: _____ **Date:** _____

Phone: _____

Date of Working Lunch: _____ **Time:** _____

Business Purpose: _____

Persons Attending: _____

Location: _____

Estimated Cost: _____

I hereby certify that the above authorization is for valid Authority related business and that I have read and understand the Travel and Miscellaneous Expense Reimbursement Policy & Procedures.

Employee's Name **Signature** **Date**

Approved By:

Supervisor

Executive Director

Date

Date

Attachment # 3
Ogdensburg Bridge and Port Authority

MISCELLANEOUS EXPENSE AUTHORIZATION FORM

Name/Title: _____ Date: _____

Phone: _____

Reimbursement is requested for the following expenses:

Describe how this activity relates to your position at the Authority:

I hereby certify that the expenses authorized above are for valid Authority related business and that I have read and understand the Travel and Miscellaneous Expense Reimbursement Policy & Procedures.

Employee's Name **Signature** **Date**

Approved By:

Supervisor

Executive Director

Date

Date

**Attachment # 4
Ogdensburg Bridge and Port Authority**

EDUCATION REIMBURSEMENT AUTHORIZATION FORM

Name/Title: _____ Date: _____

Phone: _____

Education reimbursement is requested for the following expenses:

College/University Name: _____

Semester/Year: _____

Course Name: _____

Description of Course: _____

Date of Completion: _____

Describe how this course relates to your position at the Authority:

Estimated Cost (Tuition, books, etc.): _____
(Attach registration form, course description, etc.)

I hereby certify that the expenses authorized above are for valid Authority related business and that I have read and understand the Travel and Miscellaneous Expense Reimbursement Policy & Procedures.

_____ Employee's Name	_____ Signature	_____ Date
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Approved By:

Supervisor

Executive Director

Date

Date

Attachment # 5
Ogdensburg Bridge and Port Authority
TRAINING AUTHORIZATION FORM

Name/Title: _____ **Date:** _____

Phone: _____

Conference/Workshop/Seminar Name: _____

Description of Conference/Workshop/Seminar: _____

Location of Conference/Workshop/Seminar: _____

Date of Conference/Workshop/Seminar: _____

Describe how this conference/workshop/seminar relates to your position at the Authority:

Estimated Cost (Registration, meals, etc.): _____

(Attach registration form, description, etc.)

****If conference/workshop/seminar is for overnight travel, then a Travel Authorization Form must also be completed along with this Training Authorization Form.****

I hereby certify that the expenses authorized above are for valid Authority related business and that I have read and understand the Travel and Miscellaneous Expense Reimbursement Policy & Procedures.

Employee's Name **Signature** **Date**

Approved By:

Supervisor

Executive Director

Date

Date



Exemption Certificate

Tax on occupancy of hotel or motel rooms

This form may only be used by government employees of the United States, New York State, or political subdivisions of New York State.

Form with fields: Name of hotel or motel, Dates of occupancy (From, To), Address (number and street), City, State, ZIP code, Country

Certification: I certify that I am an employee of the department, agency, or instrumentality of New York State, the United States government, or the political subdivision of New York State indicated below; that the charges for the occupancy of the above business on the dates listed have been or will be paid for by that governmental entity; and that these charges are incurred in the performance of my official duties as an employee of that governmental entity. I certify that the above statements are true, complete, and correct, and that no material information has been omitted. I make these statements and issue this exemption certificate with the knowledge that this document provides evidence that state and local sales or use taxes do not apply to a transaction or transactions for which I tendered this document, and that willfully issuing this document with the intent to evade any such tax may constitute a felony or other crime under New York State Law, punishable by a substantial fine and a possible jail sentence. I understand that the vendor is a trustee for, and on account of, New York State and any locality with respect to any state or local sales or use tax the vendor is required to collect from me; that the vendor is required to collect such taxes from me unless I properly furnish this certificate to the vendor; and that the vendor must retain this certificate and make it available to the Tax Department upon request. I also understand that the Tax Department is authorized to investigate the validity of tax exemptions claimed and the accuracy of any information entered on this document.

Form with fields: Governmental entity (federal, state, or local), Agency, department, or division, Employee name (print or type), Employee title, Employee signature, Date prepared

Instructions

Who may use this certificate

If you are an employee of an entity of New York State or the United States government and you are on official New York State or federal government business and staying in a hotel or motel, you may use this form to certify the exemption from paying state-administered New York State and local sales taxes (including the \$1.50 hotel unit fee in New York City). This does not include locally imposed and administered hotel occupancy taxes, also known as local bed taxes.

New York State governmental entities include any of its agencies, instrumentalities, public corporations, or political subdivisions.

Agencies and instrumentalities include any authority, commission, or independent board created by an act of the New York State Legislature for a public purpose. Examples include:

- New York State Department of Taxation and Finance
New York State Department of Education

Public corporations include municipal, district, or public benefit corporations chartered by the New York State Legislature for a public purpose or in accordance with an agreement or compact with another state. Examples include:

- Empire State Development Corporation
New York State Canal Corporation
Industrial Development Agencies and Authorities

Political subdivisions include counties, cities, towns, villages, and school districts.

The United States of America and its agencies and instrumentalities are also exempt from paying New York State sales tax. Examples include:

- United States Department of State
Internal Revenue Service

Other states of the United States and their agencies and political subdivisions do not qualify for sales tax exemption. Examples include:

- the city of Boston
the state of Vermont

To the government representative or employee renting the room

Complete all information requested on the form. Give the completed Form ST-129 to the operator of the hotel or motel upon check in or when you are checking out. You must also provide the operator with proper identification. Sign and date the exemption certificate. You may pay your bill with cash, with a personal check or personal credit card, with a government voucher, or with a government credit card.

Note: If, while on official business, you stay at more than one location, you must complete an exemption certificate for each location. If you are in a group traveling on official business, each person must complete a separate exemption certificate and give it to the hotel or motel operator.

To the hotel or motel operator

Keep the completed Form ST-129 as evidence of exempt occupancy by New York State and federal government employees who are on official business and staying at your place of business. The certificate should be presented to you when the occupant checks in or upon checkout. The certificate must be presented no later than 90 days after the last day of the first period of occupancy. If you accept this certificate after 90 days, you have the burden of proving the occupancy was exempt. You must keep this certificate for at least three years after the later of:

- the due date of the last sales tax return to which this exemption certificate applies; or
the date when you filed the return

This exemption certificate is valid if the government employee is paying with:

- cash
personal check or credit/debit card
government voucher
government credit card

Do not accept this certificate unless the employee presenting it shows appropriate and satisfactory identification.

Substantial penalties will result from misuse of this certificate.

State
of
New York

EMPLOYEE REPORT OF TRAVEL EXPENSES AND CLAIM FOR PAYMENT

Agency Name Click here to enter text.			Business Unit/Department Code Click here to enter text.		
Employee ID Click here to enter text.		Official Station Click here to enter text.			
Last Name Click here to enter text.		First Name Click here to enter text.		MI Click here to enter text.	Suffix Click here to enter text.
Address Click here to enter text.					
City Click here to enter text.		State Click here to enter text.	Zip Click here to enter text.	Normal Work Hours Click here to enter text.	
Business Purpose Click here to enter text.			Travel Destination Click here to enter text.		
Travel Start Date and Time Click here to enter a date.		Travel End Date and Time Click here to enter a date.		Check if used: <input type="checkbox"/> Corp Card <input type="checkbox"/> Advance <input type="checkbox"/> Direct Bill	
Travel Description Click here to enter text.					

1. Indicate All Travel Expenses <small>If more space is required in any section, use the associated detail form (number shown in parentheses below)</small>	Totals	2. Summary	Amount
Lodging Click here to enter text.	Click here to enter text.	A. Total Travel Expenses	Click here to enter text.
Click here to enter text.	Click here to enter text.	B. Subtract Amount Paid with Travel Advance	Click here to enter text.
Transportation (AC3259-S) Click here to enter text.	Click here to enter text.	C. Subtract Amount Billed to Corp Card (AC3256-S)	Click here to enter text.
Click here to enter text.	Click here to enter text.	D. Other Direct Bill to Agency (Specify)	Click here to enter text.
Meals (AC3258-S) Overnight Per Diem @ \$ each =	Click here to enter text.	Click here to enter text.	Click here to enter text.
Additional Breakfast @ \$ each + Additional Dinner @ \$ each =	Click here to enter text.	Click here to enter text.	Click here to enter text.
Day Trip Breakfast @ \$ each + Day Trip Dinner @ \$ each =	Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	E. Other Adjustments (Specify)	Click here to enter text.
Mileage Claimed (AC160-S) @ ¢ per mile =	Click here to enter text.	Click here to enter text.	Click here to enter text.
Incidental Expenses – List (AC3259-S) Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
Total Travel Expenses – Enter in Section 2 Line A	Click here to enter text.	Total Amount Claimed	Click here to enter text.

Traveler's Certification

I hereby certify that the above account and attached schedules are just, true and correct, that no part thereof has been paid, except as stated therein, and that the balance therein stated is actually due and owing, and that the amounts claimed were necessary an incurred in the performance of my official duties.
 Click here to enter text. Click here to enter a date.

Signature Title Date

Supervisor's Certification (if required)

I, the claimant's supervisor, certify that this account has been examined and to the best of my knowledge and belief, the amounts claimed therein were necessary for the performance of the claimant's authorized official duties.

Click here to enter text. Click here to enter a date.

Signature Title Date

FOR AGENCY USE ONLY	Expense Report Number Click here to enter text.	Travel Auth. Code Click here to enter text.
	Entered by Click here to enter text.	Date Click here to enter a date.

State
of
New York

CLAIM FOR TRAVEL REIMBURSEMENT BY A NON-EMPLOYEE

Agency traveled for <small>Click here to enter text.</small>				
Vendor ID <small>Click here to enter text.</small>		Vendor Name <small>Click here to enter text.</small>		
Last Name <small>Click here to enter text.</small>		First Name <small>Click here to enter text.</small>		Suffix <small>Click here to</small>
Address <small>Click here to enter text.</small>				
City <small>Click here to enter text.</small>			State <small>Click here to</small>	Zip <small>Click here to enter text.</small>
Business Purpose <small>Click here to enter text.</small>		Travel Destination <small>Click here to enter text.</small>		
Travel Start Date <small>Click here to enter a date.</small>	Travel Start Time <small>Enter time (include AM or PM)</small>	Travel End Date <small>Click here to enter a date.</small>	Travel End Time <small>Enter time (include AM or PM)</small>	
Travel Description <small>Click here to enter text.</small>				

Indicate All Expenses – If more space is required in any section, use the associated detail form (number shown in parentheses below)	Totals
Lodging <small>Click here to enter text.</small>	
<small>Click here to enter text.</small>	
Transportation (AC3259-S) <small>Click here to enter text.</small>	
<small>Click here to enter text.</small>	
<small>Click here to enter text.</small>	
Meals (AC3258-S) <small>Click here to enter text.</small>	
<small>Click here to enter text.</small>	
<small>Click here to enter text.</small>	
Mileage Claimed (AC160-S) <small>Click here to enter text.</small> miles @ ¢ per mile =	
Incidental Expenses – List (AC3259-S) <small>Click here to enter text.</small>	
<small>Click here to enter text.</small>	
<small>Click here to enter text.</small>	
Total Amount Claimed	

Vendor's Certification

I certify that the above bill is just, true and correct; that no part thereof has been paid except as stated and that the balance is actually due and owing, and that taxes from which the State is exempt are excluded.

<small>Click here to enter text.</small>	<small>Click here to enter a date.</small>
Signature	Date
Title	