

## **Travel Reimbursement Instructions:**

As UCSB is a publicly funded institution, we have a detailed reimbursement process for travel expenses. To prepare your reimbursement request please gather all travel expense receipts and follow the steps below. **Please note:** UC policy requires our Accounting Office receive all travel reimbursement requests within 45 days of the last day of travel. Consequently **we ask that you SUBMIT ALL REIMBURSEMENT DOCUMENTATION WITHIN 30 DAYS OF THE LAST DATE OF YOUR TRIP, in order to ensure that we have enough time to process the forms**, gather signatures, and deliver the packet to accounting.

1. Completely fill out the attached “Domestic Travel Reimbursement Worksheet”. If you are not a UCSB employee, leave the employee ID/SS# line blank. The ‘Account to be charged’ line should also be left blank. Please note: direct deposit is only available for UCSB employees. Please remember to include your signature at the bottom.

Transportation: Itemized receipts showing proof of payment (e.g. Card Number ... XXXX 1234) are required for transportation expenses.

- Airfare documentation must also include the travel itinerary
- Rental Car documentation must also include the complete rental contract.

Meals & Incidentals: UC Policy allows up to \$71 per day of actual expenses for meals and incidentals while on travel within the US. Actual expenses for M&I should be listed in the log on page 2 of the reimbursement worksheet. Receipts are not required to be submitted, but if there is a question regarding an expense, be prepared to supply the receipt. Incidentals include tips or fees for services such as baggage handlers, waiters, etc.

Miscellaneous Expenses: These include parking, hotel internet, conference registration, etc. Original receipts with proof of payment are required for these expenses.

Missing Evidence: If a required receipt (airfare, event registration, etc.) does not include itemization and proof of purchase, or if a receipt was lost, a “Declaration of missing evidence” form must be filled out (see attached form).

Foreign Nationals: Please follow the included instructions for “Additional Documents Needed for Non-Citizen Travel”

2. Return all items in hard copy to:  
Seminar Coordinator  
UCSB Mechanical Engineering  
Engineering II, Room 2355  
Santa Barbara, CA 93106-5070

Thank you!

**DOMESTIC TRAVEL  
REIMBURSEMENT WORKSHEET**

Submit completed form along with all original receipts to your travel processor

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
SS#/Employee ID#: \_\_\_\_\_ UC Employee: Yes No  
Address: \_\_\_\_\_ U.S. Citizen: Yes No  
\_\_\_\_\_  
City of Residence: \_\_\_\_\_  
Phone: \_\_\_\_\_ Vendor ID (if known): \_\_\_\_\_  
E-mail Address: \_\_\_\_\_ Home Campus: \_\_\_\_\_

**Account to be charged:** \_\_\_\_\_

Purpose of Travel: \_\_\_\_\_

Destination: \_\_\_\_\_

Initial Departure Date: \_\_\_\_\_ Return Date: \_\_\_\_\_

Initial Departure Time: \_\_\_\_\_ Return Time: \_\_\_\_\_

**Did you obtain a Travel Advance for this trip?** No \_\_\_\_\_ Yes \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Was there any personal time during this trip? No Yes From: \_\_\_\_\_ To: \_\_\_\_\_

**MEALS AND INCIDENTAL EXPENSES (LIST ACTUAL EXPENSES ON PAGE 2)**

Actual amount spent on meals listed on daily log. You may claim up to \$71 per day.

**There is no per diem for Domestic (See page 2 for daily log.)**

**LODGING**

Did you share a room? Yes \_\_\_\_\_ No \_\_\_\_\_ If so, with whom? \_\_\_\_\_

Number of nights: \_\_\_\_\_ Rate: \$ \_\_\_\_\_ Tax: \$ \_\_\_\_\_ Other: \$ \_\_\_\_\_

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Number of nights: \_\_\_\_\_ Rate: \$ \_\_\_\_\_ Tax: \$ \_\_\_\_\_ Other: \$ \_\_\_\_\_

**TRANSPORTATION**

Airfare: \$ \_\_\_\_\_ RT Paid for by: Credit Card \_\_\_\_\_ Charged to Department \_\_\_\_\_

Private Car Mileage: \_\_\_\_\_ License Plate #: \_\_\_\_\_ Check here to confirm your liability insurance

Rental Vehicle: \$ \_\_\_\_\_ Rental Vehicle Gasoline: \$ \_\_\_\_\_ UC Vehicle: Yes No

Taxi/Bus: \$ \_\_\_\_\_ Train: \$ \_\_\_\_\_ Other: \$ \_\_\_\_\_

**MISCELLANEOUS**

Registration: \$ \_\_\_\_\_ Tele/Fax/Internet: \$ \_\_\_\_\_ Parking: \$ \_\_\_\_\_ Other (explain):

\$ \_\_\_\_\_

Comments: \_\_\_\_\_

**SIGNATURES**

<p>I certify that the above is a true statement, that the expenses claimed were incurred by me on official University business on the dates shown, and that I have attached original receipts for each expense of \$75 or more, as required by University policy.</p> <p>_____ AUTHORIZING SIGNATURE DATE</p>	<p>AUTHORIZING SIGNATURE DATE_</p> <p>_____ Print name and title</p>
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**MEALS AND INCIDENTALS**

Please indicate by date the actual amounts spent for Breakfast, Lunch, Dinner, and any Incidentals. Please keep in mind that the allowed Maximum is \$71.00 for each 24-hour period (domestic rate). Foreign rate will vary depending on city and country.

**ACTUAL EXPENDITURES AS REQUIRED BY [G-28 Travel Regulations](#):**

- ***Subsistence Expenses (starts page 25)***
- ***Reporting Travel Expenses (starts page 41)***

Date	Breakfast	Lunch	Dinner	Incidentals	Daily Total

**Additional Documentation Needed For Non-U.S. Citizen Travel Reimbursements**

1. Completed Declaration of Immigration Status Worksheet (attached)
2. Photocopy of Green card or Work Visa if in the US, or Passport if outside the US

# Declaration of Immigration Status by Non-U.S. Citizens

## Submit with Travel Voucher Documentation

### Traveler Instructions

To comply with the U.S. immigration laws, UCSB requires the following Traveler information (i.e., Items A-E below) to be provided by all Non-U.S. Citizen Travelers (Travelers) prior to receiving travel reimbursements or benefits (e.g., when UCSB directly pays travel related hotel or airline expenses on your behalf) from UCSB. Please complete the below information and return to the UCSB representative who requested this information.

**A. Indicate your current U.S. Immigration Status (or your expected U.S. Immigration Status if you haven't yet entered the U.S.)** Note: Canadian Residents entering the U.S. without U.S. Immigration Documentation have an "Implied B-1" Immigration Status."

Travelers Ineligible for Travel Reimbursements or Benefits: In accordance with U.S. Immigration Law, Travelers with the following types of U.S. Immigration Status may not receive any form of payment from U.S. Sources, including travel reimbursements, during their stay in the U.S.

No U.S. Immigration Status obtained     F-2     H-4     O-3     P-4

**B. Indicate the type of immigration documentation you have to support your current or expected U.S. Immigration Status and attach a copy of that documentation to this form:**

- Green Card  
 I-94 Form  
 Proof of Canadian Residency – only for Canadians with "Implied B-1" status in Item A above  
 Other: Describe

**C. Indicate your "primary" relationship to the University in connection with this travel:** (Check one)

- Employee  
 Independent Contractor (e.g., non-employee guest speaker or lecturer, honoraria recipient)  
 Non - Employee (e.g., student, fellow or researcher): Describe relationship below

**D. If you checked Non-Employee in Item C above, please indicate the "primary" purpose of your travel: (Check one)**

- Travel "primarily" supported my individual educational or research goals; or  
 Travel "primarily" benefited the University: Describe benefit to University:

**E. Complete this item only if you have (or expect to have) a B-2 or WT immigration status:** (Check one choice for both Items 1 and 2 and list dates in Item 1)

1. The period of my academic activity at UCSB [  will    or     won't ] be 9 days or less  
List dates - From:  To:
2. I [  have    or     have not ] been reimbursed for reasonable travel and incidental expenses incurred in connection with a usual academic activity from more than 5 educational institutions in the previous six-month period.

TRAVELER'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

TRAVELER'S PRINTED NAME \_\_\_\_\_

## STATE PRIVACY NOTICE

The state of California Information Practices Act of 1977 (effective July 1, 1978) requires the university to provide the following information to individuals who are asked to supply information about themselves.

The principal purpose for requesting the information on this form is to determine that you are eligible to receive payments or benefits from the University (e.g., travel reimbursements). Such eligibility is dependent on proof of lawful presence in the United States in accordance with U.S. immigration laws.

Furnishing all (or specifically designated) information requested on this form is mandatory. Failure to provide such information will prevent you from receiving travel reimbursements or benefits from the University.

Information furnished on this form may be used by U.S. Citizenship and Immigration Services and will be transmitted to other State or Federal governments as required by law.

Individuals have the right to review their own records upon request.



ACCOUNTING SERVICES & CONTROLS

SANTA BARBARA, CALIFORNIA 93106-2040

DECLARATION OF MISSING EVIDENCE THAT A PAYMENT WAS MADE ON BEHALF OF THE REGENTS OF THE UNIVERSITY OF CALIFORNIA

Submit this form, completed by the traveler along with the Travel Expense Vouchers form, when original required receipt(s) have been lost or misplaced by the traveler. Fax copies or photocopies of lost or unavailable receipts must accompany this form. This form is in no way intended as a replacement for no receipt documentation or to serve as evidence of incurred expenses.

Please have traveler complete one form per receipt. Attach form(s) to Travel Expense Voucher. Copy this form as needed.

\_\_\_\_\_ declare that:
(Traveler's Name - Please Print)

1. Circle applicable option:

- a. I disbursed personal monies on behalf of the Regents of the University of California as needed:
b. University funds were disbursed on my behalf by the Regents of the University of California as follows:

Date: \_\_\_\_\_ Amount: \_\_\_\_\_

Description: \_\_\_\_\_

2. The original receipt is not available to submit with the Travel Expense Voucher claim. The reason is as follows:

\_\_\_\_\_
\_\_\_\_\_

3. Circle applicable option:

- a. I request I be reimbursed for this disbursement of my personal funds.
b. I request my Travel Expense Voucher be processed for those expenses paid directly by the University and for which I am unable to produce the necessary documentation to support such expenditures.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_