

**ALL TRAVEL SUBMITTED INCORRECTLY IS SUBJECT TO BE RETURNED.**

**NO HANDWRITTEN TRAVEL STATEMENTS WILL BE ACCEPTED.**

After completion of travel, the employee should complete the Employee Travel Expense Statement (Form 726). All necessary receipts and documentation must be attached. Documentation should be included for all expenses except meals. Lodging reimbursement requires a receipt of actual expenses from a commercial lodging establishment. The Travel Statement should be completed and forwarded to your accounting office within 60 days after month in which travel occurred.

**NOTE: If an individual rental vehicle is used, a travel statement should be completed and forwarded to accounting within 15 days after month in which travel occurred. The rental receipt, cost comparison form, and travel advance form must be signed and approved by the employee and their supervisor and attached to the Travel Statement when submitted.**

**NOTE: Regardless if you received a hotel check and/or a travel advance, a Travel Expense Statement MUST be completed and submitted with all receipts attached.**

**FRONT OF FORM:**

Employee information section:

1. Enter employee name
2. Enter employee job title
3. Enter employee identification number. This number can be found on your direct deposit email.
4. Enter county name where office is located.
5. Enter region which handles your travel, i.e. Region 1, Region 15, etc.
6. Enter your daily roundtrip Personal Commute Miles.(miles you drive to/from workplace)
7. Enter the appropriate time period (Month, Day, Year) for which reimbursement is requested.
8. Enter automobile license plate number and state of license.

**Section A: TRANSPORTATION**

**DATE:** Enter each date travel occurred. (Dates should fall within the “period covered” dates listed in the top section of page.)

**Family Name or Case #:** Fill in case number or last name of family visited, if applicable, otherwise enter N/A.  
**Do Not Leave Blank.**

**Person(s) Contacted/Purpose of Trip (This requires the City AND County where visit occurred):** Fill in origin (home or office), purpose of trip (home visit/meeting/training), and return (home or office).

- If training travel, the type of training must be stated, example: new worker training, foster care training, etc., and a copy of the registration email should be attached
- If attending a meeting, type of meeting must be stated, example: staff meeting, management meeting, etc.

**The city and county where travel (visit or meeting) took place must be stated.**

**Odometer Reading:** Enter beginning and ending odometer reading. Total miles will automatically compute when using the electronic version of the travel form.

**NOTE: Each time the family name/case and/or destination changes, new beginning and ending odometer readings must be entered regardless if the same day.**

**Personal Miles:** If travel originates from home on a day other than the weekend/holiday and home is not your official workplace, the distance from your residence to your workplace is entered in this field. If travel originates from your workplace, then this field is left blank.

If travel ends at your home on a day other than the weekend/holiday and home is not your official workplace, the distance from your workplace to home is entered in this field.

When in travel status and visiting relatives, friends, shopping, etc., these miles are recorded in this field.

**NOTE: Regardless of the time when returning home during the week, you are still required to record personal commute miles.**

**Official Duty Miles:** Will automatically compute when using the electronic version of the travel form. The difference between total miles and personal miles is entered in this field.

**Miles to be Paid at 0.54:** If determination has been made that a personal vehicle is the most advantageous form of travel, official duty miles traveled will be entered in this field. When traveling overnight, mileage incurred for meal purposes cannot exceed 30 miles per day. For single day travel over 75 miles or for multi day travel to meetings, conferences, etc., regardless of overnight status, the employee must combine the miles when completing the Cost Comparison Form to determine the most cost effective means of transportation

**Miles to be Paid at 0.19:** If determination has been made that a rental vehicle is the most advantageous form of travel but a personal vehicle is used, official duty miles traveled will be entered in this field. When traveling overnight, mileage incurred for meal purposes cannot exceed 30 miles per day. For single day travel over 75 miles or for multi day travel to meetings, conferences, etc., regardless of overnight status, the employee must combine the miles when completing the Cost Comparison Form to determine the most cost effective means of transportation.

### **BACK OF FORM:**

#### **Section B: MEALS AND LODGING**

**Purpose of Trip/Location of Trip:** Enter the purpose of the trip and city AND county, state where meals and/or lodging expenses were incurred.

**NOTE: For trips involving multiple travel destinations or overnight travel, base the per diem rate on where the night was spent.**

**Date of Departure:** Enter the date travel began. (on first row)

**Date of Return:** Enter the date travel ends. This is the date that you arrive back at your residence or workplace. (on bottom row)

**NOTE:** WHEN travel does not require an overnight stay and employee's destination is more than 50 miles away from residence and primary work location **AND** employee is away from residence or primary work location for more than thirteen hours, the time of departure and time of return must be entered in order to receive the total day's per diem. Do not use the first or last row when claiming meals under this criterion.

**Breakfast:** Enter the applicable meal rate. \$6.00 for regular cost area; \$7.00 for high cost area.

If this meal is provided as part of a conference fee or paid for by another agency, the applicable meal rate is not to be entered on the travel form.

Meal rates for out of state can be obtained on GSA's website.

**Lunch:** Enter the applicable meal rate. \$7.00 for regular cost area; \$9.00 for high cost area

If this meal is provided as part of a conference fee or paid for by another agency, the applicable meal rate is not to be entered on the travel form.

Meal rates for out of state can be obtained on GSA's website.

**Dinner:** Enter the applicable meal rate. \$15.00 for regular cost area; \$20.00 for high cost area

If this meal is provided as part of a conference fee or paid for by another agency, the applicable meal rate is not to be entered on the travel form.

Meal rates for out of state can be obtained on GSA's website.

**Total Per Diem:** Will automatically compute when using the electronic version of the travel form. On the day of departure and the day of return, this field will calculate as 75% of the total day's eligible per diem.

**Vehicle Rental:** Rental rate per day is entered in this field if the employee is paying for the cost out of pocket. Rental receipt must be attached to travel form. If the vehicle that is rented is larger than the approved vehicle rental sizes (compact, intermediate or full-size), an explanation must be written on the receipt as to why the larger vehicle was used. Travel expense statement must be submitted to accounting within **15** days after month in which travel occurred.

**NOTE: The rental receipt, cost comparison form, and travel advance form must be signed and approved by the employee and their supervisor and attached to the Travel Statement when submitted.**

**Lodging:** Rate per day is entered in this field. Lodging receipt showing a "0" balance due must be attached. If hotel was direct billed, do not enter amounts in the lodging fields; only attach the receipt to your travel statement.

**Totals of Meals & Lodging:** Will automatically total when using electronic version of travel form.

### Section C: COMMON CARRIER & PARKING

**Date:** Enter the date the expenses are incurred for taxi, bus, MARTA, or other public modes of transportation, and parking.

**Amount:** Enter the amount of the applicable expense. Receipts are required to substantiate these expenses, if obtainable.

**Section D: GAS**

**Date:** Enter the date the expenses are incurred.

**Amount:** Enter the amount of the applicable expenses. Receipts are required to substantiate these expenses.

**Section E: REGISTRATION FEE, CHILD MEALS, MISC.**

**Date:** Enter the date the expenses are incurred for registrations, child meals and miscellaneous expenses. Miscellaneous expenses must be related to emergency situations (i.e. client medical purchases, work related postage expenses). Receipts are required to substantiate these expenses.

**NOTE:** Receipts related to children must include the child's full name, date of birth, Legal County of residence, employee's signature and approving authority's signature. To ensure small receipts are not lost, it is recommended that the employee attach receipts to a single sheet of paper, and write the necessary information out to the side of the receipt.

**The Total Amounts for all of the above sections will automatically fill when using the electronic version of the travel form.**

**Section F: EXPLANATION OF UNUSUAL AMOUNTS**

Use this section to validate reasons for any miscellaneous purchases claimed in section E.

**Section G: COMPUTATIONS FOR REIMBURSEMENT**

**The electronic version of the travel form, lines 1-8 will automatically compute.**

**Line 9 will always be entered manually. "Net Amount Due to Employee" and "Net Amount Due to Agency" will compute automatically.**

- 1) System will enter total reimbursable miles at TIER 1 Rate
- 2) System will enter total reimbursable miles at TIER 2 Rate
- 3) System will enter total subsistence amount; lodging receipt must be attached even if paid with agency check or if direct billed
- 4) System will total lines 1 thru 3
- 5) System will enter total amount for common carrier & parking expenses. Receipts must be attached.

- 6) System will enter total gas expenses. Receipts must be attached.
- 7) System will enter total amount for registration, child meals and miscellaneous expenses. Receipts must be attached.
- 8) System will total lines 4 thru 7.
- 9) Enter, if applicable, **total amount of travel advance and hotel check** as these expenditures are paid directly to the employee or hotel
  - a) System will enter amount due to the employee. If line 8 exceeds line 9
  - b) System will enter amount due to agency. If line 9 exceeds line 8

**THE EMPLOYEE MUST SIGN AND DATE THE TRAVEL STATEMENT. THE EMPLOYEE NAME MUST ALSO BE PRINTED.**

**THE EMPLOYEE'S SUPERVISOR OR THE DESIGNEE MUST SIGN AND DATE THE TRAVEL STATEMENT AFTER CAREFUL REVIEW. THE EMPLOYEE'S SUPERVISOR'S NAME MUST ALSO BE PRINTED.**

**SUPERVISORY LEVEL APPROVAL MUST BE SOMEONE ON A PAY GRADE HIGHER THAN THE EMPLOYEE'S TRAVEL THEY ARE APPROVING.**

Effective March 31, 2014, due to the number of employees that are being virtually supervised (supervisor does not sit at the same location), the following new procedures are being put into place:

- Employee completes and signs their travel statement and emails the statement and all supporting documentation to their supervisor
- Supervisor will print and approve the travel statement and all supporting documents and MAIL to the appropriate Regional Accounting offices for processing