

STATE OF CALIFORNIA TRAVEL EXPENSE CLAIM INSTRUCTIONS

(1) MONTH/YEAR: Enter numerical designation of month and last two digits of the year in which the first expenses shown on the form were incurred.

(2) DATE/TIME: Enter date and time of departure on the appropriate line using twenty-four-hour clock (example: 1700 = 5:00 p.m.). Show time of departure on date of departure, show time of return on the date of return. If departure and return are on the same date, enter departure time above and return time below on the same line. Where the first date shown is a continuation of trip, enter "Continuing" above that date, and where a trip is continuing beyond the last date shown, write "Continuing" after the last date.

(3) LOCATIONS WHERE EXPENSE WERE INCURRED: Enter the name of the city, town, or location when expenses were incurred. Abbreviations may be used.

(4) LODGING: Enter the actual cost of the lodging not to exceed the maximum amount authorized by current Department of Personnel Administration (DPA) regulations, bargaining agreements and detailed in the State Administrative Manual (SAM) Sections 0721 to 0724. A receipt is required for any expenditure of \$25 or more.

(5) MEALS: Enter the actual cost of each meal not to exceed the maximum amount for each meal as authorized by current DPA regulations, bargaining agreements and detailed in SAM Sections 0761 to 0763. Dinner column is to be used to claim dinner on regular travel, overtime meals, and long-term, noncommercial and relocation daily meal expenses.

OVERTIME MEAL AND BUSINESS RELATED MEAL: Enter the actual cost of the meal not to exceed the maximum amount authorized by current DPA regulations, and bargaining agreements. Refer to DPA Management Memos for receipt requirements

(6) INCIDENTALS: Enter the total actual cost of incidentals not to exceed the maximum amount authorized by current DPA regulations and agreements.

(7) TRANSPORTATION: Purchase the least expensive round-trip or special rate ticket available. Otherwise the difference will be deducted from the claim. If you travel between the same points without using round-trip tickets, an explanation should be given.

(A) COST OF TRANSPORTATION: Enter the cost of cash purchase of transportation. Show how transportation was obtained if fare was not purchased for cash. Use "CC for credit card and "C" for cash. If transportation was paid by the State, enter method of payment only. Use "SCC" for State credit card, "TO" for ticket order or "BSA" for billed to State agency. Attach all passenger coupons and ticket order stubs including the unused portion of tickets, other credit documents or premiums, where credits or refunds are due to the State.

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(B) - TYPE OF TRANSPORTATION USED: Enter method of transportation used. Use "R" for railway, "B" for bus, airporter, light rail, or BART, "A" for scheduled commercial airline, "RA" for rental aircraft, "DA" for department-owned aircraft "PA" for privately owned aircraft, "PC" for privately owned car, truck or

other privately owned vehicles, "SV" for specially equipped vehicle for the handicapped, "SC" for State vehicles, "RC" for rental vehicles, for taxi, and "BI" bicycle. Supervisors shall not authorize the use of motorcycles on official State business, and no reimbursement will be allowed for motorcycles.

(C) CAR FARE, TOLLS, AND PARKING: Enter carfare, bridge tolls, and parking charges; attach a voucher for any parking charge in excess of \$6.00 for any one continuous period of parking.

(D) PRIVATE CAR USE: Enter number of miles traveled and amount due for mileage for the use of privately owned automobiles as authorized by current agreements, regulations, and detailed in SAM Section 0754.

(8) BUSINESS EXPENSE: Claims for phone calls must include the place and party called. If charge exceeds \$2.50, support by vouchers, or other evidence. Emergency purchases of equipment, clothing or supplies, travel expenses of inmates, wards, or patients of institutions, and all other charges in excess of \$ 1.00 require receipts and an explanation.

(9) ENTER TOTAL EXPENSES FOR DAY

(10) ENTER SUBTOTALS TOTALS

(11) PURPOSE OF TRIP, REMARKS OR DETAILS: Explain need for travel and any unusual expenses. Enter detail or explanation of items in other columns, if necessary Vouchers must be provided for any miscellaneous item of expense.

(12) NORMAL WORK HOURS: Enter your and ending normal work hours using twenty-four-hour clock (example: 0800 = 8:00 a m.).

(13) PRIVATE VEHICLE LICENSE NUMBER-Enter license number of the privately owned vehicle used on official State business. To claim reimbursement, you must have met the requirements as prescribed by SAM Sections 0751, 0752 and 0753 pertaining to operator requirements, vehicle safety, seat belt usage and authorization.

(14) MILEAGE RATE CLAIMED: Enter the rate of reimbursement beina claimed for private vehicle use.