



The Road to  
ADHD Travel



# The Road to ADH Travel

Presented By:

The Arkansas Department of Health

Accounts Payable Travel Unit



# Contents of Training PowerPoint

- **General Information**
- **Quick & Easy Steps to Travel**
- **Typical Reasons for Return**
  - **Travel Forms**



# General Information

- **Tips on Meals (Maximum of 15%)** During the Arkansas 86<sup>th</sup> General Assembly, Act 715 (SB816) was passed allowing for personal reimbursement to state employees for the payment of tips while traveling on Official Business. The tip amount must not exceed 15% of the meal amount. The total reimbursement for meals and tips shall not exceed the maximum rates prescribed by the Arkansas Financial Management Guide prior to taxes.
- **Travel reimbursement is not a per diem and is to be claimed for actual expenses of meals and lodging not to exceed the maximum allowable rates as listed in the federal travel directory, plus applicable sales tax. It is the responsibility of the traveler to submit claims for actual expenses substantiated by authentic original receipts. It is the responsibility of the travel supervisor/administrator to verify that all expenses claimed are business related and are genuine. Failure to comply with this policy may be grounds for disciplinary action.**



# General Information

- **Employees do not need an approval letter from their travel supervisors when traveling more than 300 miles per day.**
- **Employees do not need an approval letter from their travel supervisors when traveling more than 25 vicinity miles.**
- **The Agency will use the ADH Mileage Chart to list mileage traveled. This is discussed more later in the presentation.**
- **The Unavailability of a State Vehicle Form is no longer needed.**
- **When travelers and travel supervisors sign the TR-1(s) and/or a Travel Expense Reconciliation Form (FIN-1012), they must use any color ink other than black or red.**



# General Information

- **Travel Administrator/Supervisor List**
  - All additions, deletions, changes, corrections, etc., must be submitted through the Center ADMO using the Travel Administrator/Supervisor Designation Form (FIN-134).
  - The travel administrators are:
    - Deputy Directors
    - Center Directors
    - Center ADMOs
    - CFO and Deputy CFO
  - The Travel Processor or the Travel Administrator / Supervisor must make all inquiries concerning the status of travel. Ten working days processing time is required. If instructed to resubmit travel, the word RESUBMIT must be put on all pages of the travel. This is discussed more later in this presentation.



# General Information

- Travelers should submit their travel on a monthly basis. If travel that is more than two months old or more than two months of travel is submitted, the travel and a letter of explanation must go through the Center Director for approval.
- If traveling on a Saturday or Sunday to attend a meeting, conference, or training the traveler will no longer need an approval letter.
- If the traveler has to attend health fairs, preparedness exercises, immunization clinics, etc. on the weekends they can be reimbursed mileage from their residence with a prior approval memo from their supervisor attached to the TR-1.
- Mileage is reimbursed to the airport from the employee's official station. If the employee leaves from his/her residence traveling to the airport, the shortest distance (from home or official station) must be used.



# General Information

- The Agency will reimburse for the first checked bag with an original receipt. The amount must be listed in the common carrier column on the TR-1 and the proper common carrier general ledger code must be used. For two or more checked bags, there must be an approval letter from the Agency Director (or designee) and an original receipt.
- The Agency no longer offers travel advances. Each Center/Region should have an Agency Travel Card to use for airfare, lodging and registrations.
- This form will no longer be used. If there is a non-state employee or a non-ADH employee traveling for our Agency, an approval letter from the Agency director or designee must be attached to the travel.
- Texarkana, Texas is considered in-state and does not require an Out-Of-State Travel Authorization (FIN-1010).



# General Information

- The Travel Administrators/Supervisors are responsible for the verification and approval of all travel for employees under their jurisdiction.
- A traveler's immediate or higher level supervisor must approve his/her travel.
- Lodging and meals are not allowed within 50 miles of the traveler's official station or residence.
- An employee must not be reimbursed for any travel by any entity other than the Agency without prior justification and written approval.
- If an employee receives reimbursement from a third party and the Agency has incurred any costs, the employee must reimburse the Agency for those costs.



# General Information

- Original receipts for any expenses (except meals) are required and must be attached to the TR-1 for reimbursement.
- Receipts must be in the traveler's name.
- Only authorized travel forms will be accepted.
- TR-1's and FIN-1012 must have original signatures and the signatures must be in any color ink except black or red.
- The TR-1 must be prepared electronically, typewritten or printed in black or blue ink.
- When reserving a room for an over night stay, all reservations must be made directly with the hotel either by phone or internet. Internet booking agents are not allowed.



# General Information

- A Request for Waiver to Exceed the Maximum Lodging Rate (FIN-1000) must be submitted for approval prior to travel if a hotel room cannot be reserved for the per diem amount of the town/city the traveler is visiting.
- There must be an overnight stay in order to be reimbursed for meals.
- Meals are reimbursed for actual expenses incurred, but should never exceed the maximum allowable rate (before taxes).
- The incidental amount (food) is considered a part of meals and should be included in the meal column. To receive reimbursement, the traveler must be eligible for all three meals in one day.



# General Information

- For reimbursement on partial days, meals charged must be in proportion to the time in travel status.
- Tips on meals (not to exceed 15% of the meal) may be reimbursed, however the total for meal and tip should never exceed the maximum allowable rate (before taxes).
- If spending the night with a third party and there is no charge for lodging, this should be stated in the comment section of the TR-1.
- Receipts are not required for meals.
- Valet parking is not reimbursable.
- A letter of justification is not required for ice, food samples and emergency postage.
- Refreshments for meetings cannot be reimbursed on a TR-1.



# General Information

- One employee may not pay the travel expenses of another employee. If employees share a room, each must pay his/her share of the cost of the room each night.
- Ground transportation charges from and to the traveler's residence/official station to the airport are not an allowable expense.
- Ground transportation charges between a hotel and restaurant are not an allowable expense.
- If a meal is included as a part of a conference registration fee, reimbursement may not be claimed for the meal on a TR-1.
- Lodging within 50 miles of the traveler's official station or residence is a non-allowable expense. The Agency Director of designee must authorize any exceptions and at their discretion may alter the mileage to allow for lodging.



# Quick & Easy Steps to Travel

- The following must be on all pages of the TR-1:
  - Vendor Number
  - Department (Should be Arkansas Department of Health)
  - Name (As it appears in AASIS – if there is a change this should be submitted to ADH Human Resources)
  - Address (As it appears in AASIS – if different a change should be completed and submitted to ADH Human Resources)
  - Official Station (The town/city of the traveler's official station)
  - Private Vehicle License Number (If traveler is claiming mileage or parking)
  - Direct Deposit or Mail Warrant



# Quick & Easy Steps to Travel

## (Continued)

- **Traveler Signature** (Must be Original & in any color ink other than black or red – Cannot be traced over or a copy)
- **Traveler Title** (This can be official title or working title)
- **Traveler Supervisor Printed Name and Title**
- **Travel Supervisor Signature** (Must be Original & in any color ink other than black or red– Cannot be traced over or a copy)
- **The following must be on the Travel Worksheet:**
  - **Traveler Name**
  - **Vendor Number** (This is not the position number or the personnel number)



# Quick & Easy Steps to Travel (Continued)

- **Direct Deposit or Mail Warrant**
- **Date** (This is the date the worksheet is completed)
- **Dates of Travel** (This is the dates of travel listed on the TR-1)
- **Correct General Ledger Number(s)**
- **Amount for a GL Number** (The totals must match the total on the worksheet and the total of the travel on the TR-1)
- **Amount** (This must match the total of the travel on the TR-1)
- **Cost Center** (Will start with 609 or 610)
- **Internal Order Number** (Will start with an A and must be current)
- **WBS Elements are no longer used**



# Quick & Easy Steps to Travel

## (Continued)

- **Mileage Reimbursement:**

- **Use the ADH Mileage Chart**

- If not on the chart, use the official Arkansas State Highway Chart Legend Map mileage

- If not on the Highway Chart Legend Map, use [randmcnally.com](http://randmcnally.com) – Use the shortest distance)

- If not in Rand McNally, the employee may plot mileage on the Arkansas State Highway Map

- **When using Rand McNally,**

- Do not enter street addresses or zip codes (Only list town and state to town and state)

- Always use shortest distance when check mileage



# Quick & Easy Steps to Travel

## (Continued)

- Make sure that the correct mileage reimbursement amount is used
- The traveler should spell out the names of the cities/towns (on the TR-1(s)) visited
- Traveling with overnight stay:
  - Employee should know the maximum per diems prior to travel
  - Meals are reimbursed for actual expenses incurred, but should never exceed the maximum allowable rate (before taxes) - If the traveler puts the per diem amount for meals and did not actually spend that amount, they are falsifying their TR-1



# Quick & Easy Steps to Travel

## (Continued)

- Tips on meals may be reimbursed, however the total for meal and tip should never exceed the maximum allowable rate (before taxes)
- Attach the original itemized hotel receipt
- A Request for Waiver to Exceed the Maximum Lodging Rate (FIN-1000) must accompany the travel
- Put travel status times and meal tax rates on the TR-1
- If the employee stays with friends, relatives, etc., they are eligible for meals, but must put in the comment section of the TR-1 that they stayed with friends or relatives



# Quick & Easy Steps to Travel

## (Continued)

- If the employee is eligible (in travel status all day with overnight stay) for the \$3.00 meal incidental, it must be included in the meal amounts – *not in the incidental column*
- If the employee is traveling out-of-state, there must be an Out-of-State Travel Authorization (FIN-1010) attached to the travel
- TR-1(s) must be legible or will be returned
- If the Agency pays for part of the expenses with an Agency Travel Card or a purchase order, a Travel Expense Reconciliation Form (FIN-1012) must be attached to the travel along with copies of the receipts for payment



# **Quick & Easy Steps to Travel**

## **(Continued)**

- If any change is made to the Out-of-State Travel Authorization (FIN-1010), the original FIN-1010 must be sent to the ADMO and Chief Fiscal Officer for their initials approving the change prior to the travel being submitted**
- When travel is returned for corrections, the employee must not complete new forms - They should just draw a line through the wrong information and make the corrections & initial**
- One employee cannot pay the expenses of another employee**
- Travel must not be re-submitted unless the ADH Travel Unit requests that it be re-submitted**



# Quick & Easy Steps to Travel

## (Continued)

- Travelers should always submit their travel monthly
  - If the travel is older than two months or more than two months of travel are submitted, the travel and a letter of explanation must go through the Center Director for approval
- Valet parking is not reimbursable
- Ground Transportation charges from and to the employee's residence/official station to the airport is not allowed
- Refreshments for meetings cannot be reimbursed on a TR-1 – they must be pre-approved and submitted through a P.O. or Petty Cash



# Quick & Easy Steps to Travel

## (Continued)

- Air travel out-of-state should be via commercial airlines:
  - Tickets are to be purchased coach airfare only
  - Travel should be planned in advance to obtain the best rates
  - Flights selected should be the least expensive available fare
  - Non-stop flights will not be approved when less expensive flights are available with a two hour or less layover
  - Checked baggage fee must be added to cost when comparing airline costs



# Typical Reasons for Return

---

1. No travel supervisor or traveler signature on paperwork
2. Travel supervisor or traveler signature is traced
3. The traveler's address is incomplete on the TR-1(s)
4. Need official station on the TR-1(s)
5. Need private vehicle license number on TR-1(s)
6. Need vendor number
7. Vendor number is incorrect
8. Need correct cost center
9. Need correct internal order number
10. Exceeds maximum meal reimbursement amount



# **Typical Reasons for Return**

## **(Continued)**

- 11. Need travel status times**
- 12. Need meal tax rate**
- 13. Exceeds maximum reimbursement amount for lodging**
- 14. Need name of town visited for meals and/or lodging**
- 15. Need original receipts**
- 16. Need title of traveler**
- 17. Need printed name and title of travel supervisor**
- 18. Need Chief Financial Officer approval letter**
- 19. Need the updated / official travel form completed**



# Typical Reasons for Return

(Continued)

20. Need a completed Travel Worksheet (FIN-106)
21. Need a completed Out-of-State Travel Authorization (FIN-1010)
22. Need a completed Request for Waiver to exceed the Maximum Lodging Rate (FIN-1000)
23. Need a completed Travel Expense Reconciliation Form (FIN-1012)
24. Need copies of the flight itinerary, registration receipt / P.O., lodging receipt, etc. to accompany the FIN-1012
25. Mileage is incorrect, please initial corrections



# Typical Reasons for Return

(Continued)

26. Mileage shows significantly less mileage than Rand McNally – is this correct?
27. Need Non-State Employee Letter
28. Need to use correct General Ledger Code on the Travel Worksheet
29. Need a itemized hotel bill
30. Need correct address – address on TR-1(s) does not match the address in AASIS
31. Name is different in AASIS
32. Meals without overnight stay are not reimbursable



# Typical Reasons for Return

(Continued)

- 33. Cannot claim safe and safe taxes on lodging
- 34. Cannot reimburse travel that has not been completed yet – verify correct travel dates
- 35. Lodging not listed on the date it occurred (cannot be put in one lump sum on the TR-1 if more than one night)
- 36. Official Station is the city / town the traveler is stationed – not the county or program
- 37. Cannot reimburse travel from a copy
- 38. Cannot reimburse for valet parking
- 39. The FROM and TO columns must be city to city or city to vicinity



# Typical Reasons for Return

(Continued)

40. Must have a Chief Financial Officer prior approval letter for rental cars
41. Total on the travel worksheet does not match the total on the TR-1(s)
42. When corrections are made, the totals are not carried across and down – also need to correct the travel worksheet
43. When meals are furnished at a conference / meeting and the traveler is asking for those meals to be reimbursed.

---

*These are not all of the reasons travel is returned, however, these are the most common reasons travel is returned for correction.*



# TRAVEL FORMS

•The following list of forms will be used for travel:

•Travel Expense Reimbursement Form (TR-1)

•This is the form that is used for reimbursement of all travel expenses

•Travel Worksheet (FIN-106)

•This is the form used to show how the travel should be expensed and the funding information (must be attached to TR-1)

•Out-of-State Travel Authorization (FIN-1010)

•The original of this form must be attached to the TR-1 and travel worksheet if the travel took the traveler out of Arkansas

•Travel Expense Reconciliation (FIN-1012)

•If the Agency pays for part of the trip (by direct billing, purchase order or credit card) that the traveler does not pay for out of pocket, this form must be completed and attached to the TR-1 and travel worksheet

•Request for Waiver to Exceed the Maximum Lodging Rate (FIN-1000)

•If the traveler cannot get a room for the maximum allowable rate, this form must be completed, approved and submitted with the TR-1 and travel worksheet

•Travel Administrator/Supervisor Designation (FIN-134)

•This form is used to add, delete or change a travel administrator / supervisor to the official list



**In order for everyone to understand how to use the forms, we will take a quick look at each of the travel forms that have been revised.**

**Remember that these forms are the official travel forms and must be the only forms used.**

# Travel Expense Reimbursement (TR-1)

ARKANSAS ADMINISTRATIVE STATE			
TRAVEL EXPENSE REIMBURSEMENT			
(SUBMIT ORIGINAL)			
VENDOR NUMBER	← 1		
DEPARTMENT	Arkansas Department of Health	← 2	
NAME OF PAYEE	← 3		
PLACE OF RESIDENCE/ADDRESS	← 4		
COST ASSIGNMENT FOR TRIP:	COST CENTER	← 5	INTERNAL C

1. Vendor Number is not the employee's AASIS personnel number or position number
2. Department is always the Arkansas Department of Health
3. Name of Payee should be listed as shown in AASIS
4. Place of residence/address is the address listed in AASIS and where a warrant or W-2 would be mailed
5. Cost Center is a part of the funding that reflects the organizational unit.

# Travel Expense Reimbursement

(TR-1)

(Continued)

			Direct Deposit		Warrant	
UNIVERSITY-WIDE INFORMATION SYSTEM				1		2
REIMBURSEMENT FORM						
(PERSONAL ONLY)						
		OFFICIAL STATION		3		
		PRIVATE VEHICLE LICENSE NO.		4		
INTERNAL ORDER						5

1. Direct Deposit should be used / checked if the traveler would like their travel reimbursement electronically transferred to their banking account
2. Warrant should be marked if the traveler would like a check to come to their address as listed on the TR-1 and in AASIS
3. Official Station is the city/town that the traveler is assigned
4. Private vehicle license number must be on the TR-1 if asking for reimbursement of mileage or parking when driving a personal vehicle
5. Internal Order reflects funding source for the travel

# Travel Expense Reimbursement

(TR-1)

(Continued)

DATE	NAME OF TOWN VISITED	DESCRIPTION	COMMON CARRIER	HOTEL ROOM	DETAILED EXPENDITURES OTHER THAN		
					MEALS	TAXI	INCIDENTALS
▲	▲	▲	▲	▲	▲	▲	▲
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>

1. Date is the actual day the travel was completed (Must always be completed)
2. Name of town visited is completed if the traveler is asking for reimbursement of detailed expenditures - The city/town that the hotel or place of lodging actually takes place will be listed here
3. Description is the reason for travel (Must always be completed as detailed as possible)
4. Common Carrier is used if the traveler is asking for reimbursement of their airfare and/or if they are to be reimbursed for checked baggage (Must have original receipts)
5. Hotel Room is used if the traveler is asking for reimbursement of their lodging expenses (Must have original receipts)
6. Meals column is used to reimburse the traveler for actual meal expenses
7. Taxi is used to reimburse the traveler for taxi services/shuttles/buses to and from the airport when traveling to a destination (Must have original receipts)
8. The incidental column is used for reimbursement of parking, registration, emergency postage, internet use or other items that need written approval from the CFO



# Travel Expense Reimbursement

(TR-1)

(Continued)

MILEAGE							
CODE	TELEPHONE	TOTAL PER DAY	FROM	TO	MILEAGE DRIVEN	RATE PER MILE	AMOUNT CLAIMED
↑	↑	↑	↑	↑	↑	↑	↑
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>

1. The code is used to advise what the incidental expense is for. The codes are listed below this section of the TR-1 (Must have original receipts)
2. Telephone is used if the traveler made state business calls (Must have original receipts)
3. Total Per Day is the total expenses listed in the first six columns for a particular date
4. The FROM column shows the town/city the traveler is leaving
5. The TO column shows the town/city the traveler is traveling to – this column is also used when asking for vicinity miles to be reimbursed.
6. The mileage driven is the actual miles taken from the ADH mileage chart or Rand McNally and any vicinity miles driven
7. The rate per mile is the reimbursement rate authorized by the State of Arkansas
8. The amount claimed is the mileage driven multiplied by the rate per mile

# Travel Expense Reimbursement

(TR-1)

(Continued)

SUB-TOTALS		INCIDENTALS CODES		(1) Postage	(2) Parking Fee	(3) Registration Fee	(4) Emergency Sta
				(5) Other (Explain)			
Comments							
				Approved By:			
		Printed Name and Title of Travel Administrator/Supervisor					
		Travel Administrator/Supervisor Signature					Date
MEAL TAX RATES				TRAVEL STATUS TIMES (Military Time)			
Date	Tax Rate	Date	Departure Time	Return Time			

1. Sub-Totals calculate the total amount of reimbursement per column
2. These are the incidental codes the traveler uses if asking for reimbursement of incidentals (Original receipts are needed) NOTE: if the traveler uses (5)Other, there must be an explanation given
3. The traveler should list any information needed to advise their supervisor or AP of something unusual about their travel or if they stayed overnight with family or friends
4. The Travel Administrator/Supervisor name and title must be printed - Sometimes it is difficult to read their signatures
5. The Travel Administrator/Supervisor must sign (in any color ink other than black or red) every page of the TR-1 - When signing they are stating that the travel is business related and genuine
6. The meal tax rate must be listed if meals are over maximum amount allowed
7. The travel status times show the date and time the travel left on and returned from a trip with an overnight stay and meals

# Travel Expense Reimbursement

(TR-1)

(Continued)

↓ <b>1</b> ↓	↓ <b>2</b> ↓								
Signature of Traveler	Date	04/21/08			EXPENDITURE SUB-TOTAL	★ <b>4</b> ★			
					MILEAGE SUB-TOTAL	★ <b>5</b> ★			
					PAGE TOTAL	★ <b>6</b> ★			
	Title								
	↑ <b>3</b> ↑				GRAND TOTAL	★ <b>7</b> ★			Last Page Only

1. The traveler must sign (any any color ink other than black or red) every page of the TR-1 - When signing they are stating that the travel is business related and genuine
2. The date shows the date the traveler completed their travel and signed the TR-1(s)
3. The traveler's title (working or official title) must be on every page of the TR-1
4. The expenditure sub-total is the total of all expenses in the first six columns of the TR-1 for the particular page (detailed expenditures)
5. The mileage sub-total is the total of all mileage amounts being reimbursed for the particular page
6. The page total is the total of the expenditure sub-total and the mileage sub-total for the particular page
7. The grand total should only appear on the last page of the travel and is the total amount of the requested reimbursement



# Travel Worksheet

(FIN-106)

(Continued)

3

02 Travel			09 Travel			Document Number:
Mileage	5050001000		Mileage	5050002000		
Meals and Lodging	5050003000		Meals and Lodging	5050004000		Date Parked:
Common Carrier	5050005000		Common Carrier	5050006000		
Ground Transportation	5050009000		Ground Transportation	5050010000		
Parking Fees	5050011000		Parking Fees	5050012000		Parked By:
Other Travel Expenses	5050013000		Other Travel Expenses	5050014000		
Non-State Personnel All Trv	5050021000		Conf. & Seminar Fees	5050018000		
Board Member Trv. Expenses	5050020000		Non-State Personnel All Trv	5050022000		Date Posted:
Postage	5020001000					
Fuel	5090005000					Posted By:
G/L Account Numbers						
FIN-106 (R /08)						

1. A list of all the travel General Ledger Account Numbers used for travel purposes
2. The general ledger account numbers are divided into 02 travel (any in-state or out-of-state official business travel that does not have a registration) and 09 travel (any in-state or out-of-state travel that has a registration)
3. The Document Number, Date Parked, Parked By, Date Posted and Posted By is only used by the Travel Unit in Accounts Payable - NOTE: Parking a document is keying the document into AASIS -Posting a document is releasing the document for payment

# Out-of-State Travel Authorization

## (FIN-1010)

ARKANSAS DEPARTMENT OF HEALTH					
Out-of-State Travel Authorization					
Approval for out-of-state travel is requested for the following individual:					
Name	← 1			Title	← 2
Official Station	← 3		Center/Branch/Section	← 4	
Destination		Departure		Return	
↑ 5		Date	Time	★ 6	Date Time
Purpose of Trip	← 7				
Other Persons Making the Trip:	Name:		Official Station/Center		
★ 8	Name:		Official Station/Center		
	Name:		Official Station/Center		

1. Name of traveler should be listed as shown in AASIS
2. The working or official title of the traveler
3. The official station is the city/town that the traveler is assigned
4. The Center/Branch/Section that the traveler is assigned
5. The destination is the city/town and the state the traveler is visiting
6. Departure date/time is when the traveler actually leaves on the trip - The return date/time is when the traveler returns from the trip
7. Why the traveler is going on the trip
8. List any additional travelers making the same trip



# Out-of-State Travel Authorization

(FIN-1010)

(Continued)

If amount exceeds the current daily maximum allowed, the Agency Director must authorize prior to travel.

Enter daily limit for:	Meals	1	Lodging	
Signature of Traveler			Date	
CODING	3			
Cost Center	Internal Order	Commitment Item #	Total	
Cost Center	Internal Order	Commitment Item #	Total	
4		If Travel is to be reimbursed by a sponsoring organization:		
Name of Organization:		Amount:		

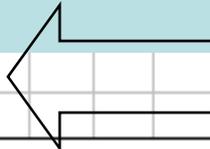
1. The daily limit/maximum allowable amount for meals and lodging must be entered here
2. The traveler must sign and date the 1010 - Acknowledging the allowable rates
3. The coding information for the travel is listed here - NOTE: The commitment item should be listed as either 02 (any in-state or out-of-state official business travel that does not have a registration) and 09 travel (any in-state or out-of-state travel that has a registration)
4. If the travel is sponsored by a third party/organization, the name and the amount they are paying must be listed here - A letter of approval for the travel and the reimbursement by a third party must accompany the 1010 when sent for approval

# Out-of-State Travel Authorization

(FIN-1010)

(Continued)

APPROVAL



		<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved
Signature of Immediate Supervisor/Manager	Date		
		<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved
Signature of Travel Administrator	Date		
		<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved
Signature of Center Director	Date		
		<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved
Signature of Agency Director (or designee)	Date		

FIN-1010 (R /08)

This section is for signatures and approvals or disapprovals.

•The signatures needed are:

•The traveler's immediate Supervisor/Manager

•The travel administrator (NOTE: the travel administrator is different from the travel supervisor)

•The Center Director

•The Agency Director or designee

# Travel Expense Reconciliation

(FIN-1012)



## Arkansas Department of Health Travel Expense Reconciliation

Traveler:		← 1				
Official Station:		← 2				
Date		Travel Reimbursement				
YR.		Name of Town Visited	Meals	Lodging	Other Travel Expenses	Total
Mo.	Day					
↑ 3		↑ 4	↑ 5	↑ 6	↑ 7	\$ ↑ 8
						\$ -
						¢

*The Travel Reimbursement section of this form must balance with the TR-1 total!!*

1. The name of the traveler should be listed as shown in AASIS and on the TR-1
2. The official station is the city/town that the traveler is assigned
3. The actual date(s) the travel was completed (Must always be completed)
4. The name of town visited (city / town the hotel is actually in) is listed here
5. The total amount of meals for a particular day
6. The total amount of lodging for a particular day
7. The total amount for registration, parking, internet use, mileage, etc. for a particular day
8. The total for a particular day

# Travel Expense Reconciliation

(FIN-1012)

(Continued)

Center/Branch/Section:			← 1	
Sponsored Business Travel Card Number (last four digits):			← 2	
Direct Billing or Credit Card Purchases**				Total
Expense Item	D C	Amount		Daily Expenses
↑ 3	↑ 4	↑ 5	\$	↑ 6 -
			\$	-
			\$	-

1. The travelers Center/Branch/Section must be listed in this area
2. The last four digits of the Agency Credit Card (if used) must be listed here
3. The expense item would be the type of expense like registration, lodging, airfare or rental car - (Please note: There would need to be an Agency Director (or designee) approval letter for a rental car)
4. D is for expenses paid by direct billing or a purchase order and C is for expenses paid by an Agency credit card
5. The amount is the cost for the expense (if it is for lodging the expense must be shown as a daily amount, not a lump sum)
6. The total of the TR-1 expense and the direct billing/credit card expense for a particular day

# Travel Expense Reconciliation

(FIN-1012)

(Continued)

		<b>1</b>	Total TR-1 Claim	\$	-
Signature of Traveler:		<b>2</b>			
Title:	<b>3</b>				
Date:	<b>4</b>				
FIN-1012 (R 7/08)					

1. The total TR-1 claim must match the total reimbursement being asked for on the TR-1
2. The traveler must sign the 1012 in any color ink other than black or red
3. Can be the working or official title of the traveler
4. The date the traveler actually signs the 1012

# Travel Expense Reconciliation

(FIN-1012)

(Continued)

		<b>1</b> →	Total Charged	\$	-	
			<b>2</b> →	GRAND TOTAL		\$0.00
			Signature of Travel Administrator/Supervisor:			<b>3</b> ←
Title:		<b>4</b> ←				
Date:			<b>5</b> ←			
<i>*Please indicate which type payment applies to each entry by inserting a D (Direct Bill/Pay) or a C (Credit Card Charge) in the appropriate column. Expense items: Lodging, Transportation, Registration, Car Rental, etc. Please attach a copy of the receipt, purchase order, airline itinerary, etc.</i>						

1. The total charges is the total expense paid by the Agency via direct billing, purchase order or credit card
2. The grand total is the total of the TR-1 claim and the direct billing/credit card expenses - This is the total for the trip
3. The travel administrator/supervisor must sign the 1012 in any color ink other than black or red
4. The working or official title of the travel administrator/supervisor
5. The date the travel administrator/supervisor actually signed the 1012

# Request for Waiver to Exceed The Maximum Lodging Rate

(FIN-1000)

ARKANSAS DEPARTMENT OF HEALTH					
Request for Waiver to Exceed the Maximum Lodging Rate					
TO:	Agency Director / Designee				
FROM:	Travel Administrator	<input type="text"/> ← 1 <input type="text"/> ← 2			
	Title				
DATE:	<input type="text"/> ← 3				
Name of Traveler:	<input type="text"/> ← 4 <input type="text"/> ← 7				
Purpose of Trip:	<input type="text"/> ← 5				
Destination:	<input type="text"/> ← 6		Dates of Travel: <table border="1"> <tr> <td>Depart</td> <td>Return</td> </tr> </table>	Depart	Return
Depart	Return				

1. The travel administrator's name goes here - NOTE: A travel administrator is the ADH Deputy Directors, Center Directors, ADMOs, the CFO and the Deputy CFO
2. The working or official title of the travel administrator
3. The date of the request
4. The name of the traveler as shown in AASIS
5. The description of the trip is entered here
6. The destination is the city/town and state the traveler is visiting
7. The date of departure and return of the traveler

# Request for Waiver to Exceed The Maximum Lodging Rate

(FIN-1000)

(Continued)

This is a request that the above named traveler be allowed to exceed the maximum lodging prescribed by the Federal Travel Directory when traveling on official business of the State.

<b>1</b>	Requested Rate:		x	number of nights = a total of	\$	-
<b>2</b>	Per Diem Rate:		x	number of nights = a total of	\$	-
<b>3</b>	Total increased cost is		\$			-

The request to exceed the maximum lodging is being made for the following reason(s):



1. The amount of the actual lodging expense would be listed here plus the number of nights and the total
2. The actual maximum allowable rate for the town/city would be listed here plus the number of nights and the total
3. The total increased cost for lodging - (Subtract the per diem amount from the requested amount)
4. The justification for the request is entered here

# Request for Waiver to Exceed The Maximum Lodging Rate

(FIN-1000)

(Continued)

1	APPROVAL:																			
2																				
3																				
4																				
5																				
6																				
7																				
8																				
9																				
10																				
11																				
12																				
13																				
14																				
15																				
16																				
17																				
18																				
19																				
20																				
21																				
22																				
23																				
24																				
25																				
26																				
27																				
28																				
29																				
30																				
31																				
32																				
33																				
34																				
35																				
36																				
37																				
38																				
39																				
40																				
41																				
42																				
43																				
44																				
45																				
46																				
47																				
48																				
49																				
50																				
51																				
52																				
53																				
54																				
55																				
56																				
57																				
58																				
59																				
60																				
61																				
62																				
63																				
64																				
65																				
66																				
67																				
68																				
69																				
70																				
71																				
72																				
73																				
74																				
75																				
76																				
77																				
78																				
79																				
80																				
81																				
82																				
83																				
84																				
85																				
86																				
87																				
88																				
89																				
90																				
91																				
92																				
93																				
94																				
95																				
96																				
97																				
98																				
99																				
100																				

This section is for signatures and approvals or disapprovals

- The signatures needed are:
  - The travelers immediate Supervisor/Manager
  - The travel administrator (NOTE: the travel administrator is different from the travel supervisor)
  - The Center Director
  - The Agency Director or designee

# Travel Administrator / Supervisor Designation

(FIN-134)

**Arkansas Department of Health**  
**TRAVEL ADMINISTRATOR/SUPERVISOR DESIGNATION**

<input type="checkbox"/> <b>Add</b>	<input type="checkbox"/> <b>Delete</b>	<input type="checkbox"/> <b>Change</b>
		
Add the employee listed below to the Travel Administrator/Supervisor List.		
<input type="checkbox"/> <b>Administrator</b>		<input type="checkbox"/> <b>Supervisor</b>

This form is used when adding, deleting, or changing information on the Travel Administrator/Supervisor list

1. Check this box if adding to the list
2. Check this box if deleting from the list
3. Check this box if completing any other changes to the list
4. Check the appropriate box if the request is for a travel administrator or supervisor
  - Please note that a travel administrator is the ADH Deputy Directors, Center Directors, ADMOs, the CFO and the Deputy CFO - The travel supervisors are immediate or higher level supervisors of the traveler



# Travel Administrator / Supervisor Designation

(FIN-134)

(Continued)



**This employee has read and understands the current Arkansas Department of Health travel policy.**



*Route, via e-mail, through Center procedures.  
The Center ADMO or Center Director routes to the Travel Unit Supervisor*

*The Travel Administrator/Supervisor list is updated on the first of each month!!*



FIN-134 (07/08)

1. When an employee is assigned the travel administrator/supervisor role, they must read and understand the current ADH travel policy
2. When the form is completed, it is routed via e-mail through Center procedures - The Center ADMO or Center Director routes to the Travel Unit Supervisor via e-mail
3. The Travel Administrator/Supervisor list is updated on the first of each month and can be found on the Travel/Communication Intranet page



# Finding the Travel Policy, Forms and Form Instructions

---

- **Go to the Agency Intranet Page**
- **Click on Policy and Procedures (left side)**
- **Click on ADH Policy and Procedures (left side)**
- **Click on Administration**
- **Click on Finance**
  - **Click on Travel for the Travel Policy**
  - **Click on Forms and Instructions for travel related forms and the instructions**



# Finding other Travel Information

- **Go to the Agency Intranet Page**
- **Click on Financial Management – under the Office of Finance (left side)**
- **Scroll all the way down and click on Travel/Communication**
- **This takes you to the Intranet page that shows:**
  - **Mileage reimbursement information**
  - **The updated mileage chart link**
  - **Rand McNally link**
  - **Travel per diem rates link**
  - **Cities/State tax rate link**
  - **Updated travel administrators/supervisor link**



# QUESTIONS?

**Please see the next slide for information on how to contact the travel unit staff.**



# How to Contact Your ADH Travel Staff

**Arkansas Department of Health**

**Travel Unit / Payables Section – Slot 28**

**4815 West Markham**

**Little Rock, AR 72205**

**Main Office Number – 501-280-4478**

---

**Travel Supervisor:**

**501-280-4547**

**Travel Coordinators:**

**501-280-4483**

**501-280-4546**

**501-280-4484**



# Post Assessment

**Please return to A-TRAIN to complete the post assessment for this course.**

**Instructions for completing the post assessment were e-mailed to you when you registered. They were attached to the registration notice.**