

# Reimbursable Travel Expenses

## POLICIES AND PROCEDURES

Revised February, 28, 2001

**TRINITY VALLEY  
COMMUNITY COLLEGE**  
*Office of Dean of Fiscal Services*



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**TRINITY VALLEY COMMUNITY COLLEGE  
REIMBURSABLE TRAVEL EXPENSES  
POLICIES AND PROCEDURES**

**SECTION 1: PURPOSE**

The purpose of this manual is to present, in an organized manner, travel policies and procedures of Trinity Valley Community College. This manual will serve as an orientation vehicle for new employees as well as a reference manual for current employees.

The Internal Revenue Service periodically makes changes to travel rules and regulations. This manual will be updated as needed.

**SECTION II: GENERAL PROVISIONS**

Travel is recognized as an essential activity and shall be authorized for these purposes:

- To assess, monitor, evaluate, or implement educational programs and related activities
- To recruit or provide guidance or counseling to students or prospective students
- To provide guidance, consultation, and/or in-service training for employees or prospective employees
- To direct the acquisition and installation of materials, supplies, and equipment
- To direct and assist in professional development and recruitment of personnel
- To attend relevant conferences with external personnel, organizations, or local, state or federal agencies
- To conduct authorized marketing activities, contract negotiations, site reviews, and evaluations
- To conduct audits, budget reviews, fiscal or financial evaluations, or other related activities
- To attend conferences or meetings called by TVCC officers/personnel.

**SECTION III: CONDITIONS AND PROCEDURES**

Travel shall be authorized solely for the purpose of conducting official TVCC business and reimbursement for travel expenditures to employees is subject to the following conditions:

- A. Except in cases of emergency, **all travel will be authorized in advance** using TVCC's Request for Travel Authorization form.
- B. Out of state travel must be approved by the President of TVCC.
- C. Travel reimbursements are only available for official TVCC business. Personal business conducted in conjunction with official travel will not be reimbursed. Also, non-official travelers' expenses (spouse, relatives, etc.) will not be reimbursed.

- D. Reimbursement for travel will be at TVCC stated rates. All rates for reimbursement are maximum amounts that may be reimbursed. Requests for reimbursements that are less than the maximum amount are authorized at the traveler's request. In addition, departments that have substantial travel costs may elect less than maximum reimbursement amounts.
- E. Travel advancements will be requested using TVCC'S Request for Travel Authorization form. This includes all forms of travel advancements such as registration fees, meals, hotel, airfare, etc., whether or not paid directly to the vendor or employee. Advancements paid directly to the employee will not be issued more than thirty (30) days in advance.
- F. When registration fees are an integral part of travel authorizations, you must include them on the Request for Travel Authorization form and attach a copy of the registration form.
- G. A Travel Report Form, which reconciles travel advances with actual travel expenses, must be turned in to the Business Office within **fifteen (15) days** after travel is completed. **Failure to turn in a Travel Report form, along with excess advancements, if any, in a timely manner could cause your advancements and/or reimbursements to be included in your taxable income (IRS tax law).**
- H. Personnel who travel regularly on short trips between campuses and miscellaneous errand trips and who desire mileage reimbursement should submit a monthly Travel Report form with the proper documentation that substantiates time, place, business purpose, and mileage for each trip. Although a monthly report is not required for this type travel, it is preferable to individual travel reports, because it limits the number of checks that need to be issued. The monthly travel report should be turned in to the Business Office in the month following the month of travel being reported. Failure to turn in a Travel Report form in a timely manner could cause your reimbursement to be included in your taxable income.
- I. Members of the College Board of Trustees may receive reimbursements for travel expenditures.

#### **SECTION IV: REIMBURSEMENT RATES**

Reimbursable travel expenses include transportation, lodging, meals, registration fees, and other similar, ordinary and necessary expenses related to business travel.

##### A. Transportation

- 1) Travel by airplane, train, bus, or car between home and business destination. Includes taxi and commuter bus fares, car rental, etc., for travel to/from airport and business destination, parking fees, and tolls. It is expected that employees will obtain the most economical airfare available. Reimbursement is actual cost. Receipts are required for documentary evidence. (Exception is for automobile mileage allowance reimbursement. See below.)

- 2) Automobile reimbursement:
  - a) TVCC vehicle-employee is reimbursed for gasoline purchased; receipts required
  - b) Personal vehicle-mileage allowance
    - i. TVCC vehicle not available – employee is reimbursed at .25/mile (attach proof of non-availability from office of Dean of Physical Facilities)
    - ii. TVCC vehicle available but not used – employee is reimbursed at .15/mile
  
- 3) Due to insurance coverage concerns, only TVCC employees and those individuals that have prior approval from the Dean of Physical Facilities are allowed to drive TVCC vehicles.

## B. Lodging

The cost of the hotel is not limited but is subject to reasonableness. When employees attend conferences or seminars held at a specific hotel, TVCC will reimburse the actual cost of lodging at that specific hotel. **Note: TVCC is exempt from paying state (Texas) taxes.** Reimbursement for Texas state hotel taxes is not authorized and will not be reimbursed. However, local hotel tax or occupancy tax is not exempt and will be reimbursed. To avoid charges for state hotel taxes, a tax exemption form should be presented upon check-in at the hotel. This form may be obtained in the Business Office. Lodging costs are reimbursed at actual cost; receipts required.

When a non-TVCC employee (spouse, dependent and/or other individual) travels with an employee, and there is a difference in room rates for single/double, etc., lodging will be reimbursed at the single rate. The employee is responsible for annotating hotel receipts for such reimbursement.

## C. Meals

The costs of meals may be reimbursed by a “Meals and Incidental Expense” per diem amount (M&IE) or by actual cost. Employees have the choice of using either the M&IE rate or keeping records of actual expenses for each business trip. However, the **IRS requires the employee to use the same method for all days within any single business trip.** Additionally, for an employee to be reimbursed for meals and the reimbursements be excluded from taxable income, the employee must travel longer than an ordinary workday in which the employee cannot reasonably be expected to complete the trip without rest or sleep. This is the so-called “overnight” rule (IRS Rev. Rul. 75-170).

1. M&IE per diem reimbursement – Receipts are not required when claiming the M&IE per diem. **Meals and incidental expenses include amounts spent for food, beverages (non-alcoholic), related tips, laundry, dry cleaning, and tips for services such as baggage handling.** It does not include expenses for telephone, faxes, tolls or taxi fares. In addition, IRS regulations require that the first and last day of travel must be prorated in accordance with reasonable business practice. TVCC has elected to prorate based upon time leaving home on the first day and time returning home on the last day.

TVCC Meals and Incidental Expenses (M&IE) per diem rate:	\$26.00/day
Prorated (M&IE) per diem rate:	\$6.00/breakfast \$8.00/lunch \$12.00/dinner

Departure times used to prorate for first business day:

Departure time is on or before 6:00 a.m. = \$26.00 allowance (breakfast, lunch, dinner)

Departure time is 6:01 a.m. through 11:30 a.m. = \$20.00 allowance (lunch, dinner)

Departure time is 11:31 a.m. through 5:30 p.m. = \$12.00 allowance (dinner)

Departure time is after 5:30 p.m. = no allowance

Arrival times used to prorate for last business day:

Arrival time is on or before 1:00 p.m. = \$6.00 allowance (breakfast)

Arrival time is 1:01 p.m. through 7:30 p.m. = \$14.00 allowance (breakfast, lunch)

Arrival time is after 7:30 p.m. = \$26.00 allowance (breakfast, lunch, dinner)

Examples of per diem method:

Example (1): Depart from home on the first day at 6:00 a.m.; 2<sup>nd</sup> day is full day, 3<sup>rd</sup> day return home at 8:00 p.m.; per diem amount allowed for trip is \$78 (\$26 each day).

Example (2): Depart from home at 5:00 p.m., 2<sup>nd</sup> day is full day, 3<sup>rd</sup> day return home 6:00 p.m.; per diem amount allowed for trip is \$52 (\$12 for 1<sup>st</sup> day, \$26 for 2<sup>nd</sup> day, \$14 on last day).

Example (3): Depart from home at 6:00 p.m., return home next day at 7:30 p.m.; per diem amount allowed for trip is \$14 (\$6 for breakfast and \$8 for lunch on day of return).

2. Reimbursement of actual meal costs – Actual costs for meals may be used rather than the per diem method. **Meals include amounts spent for food, beverages with meal (non-alcoholic), and meal tips.** Although there is no limit on actual cost reimbursement, employees are subject to a "reasonable" cost for meals. Employees must have approval from the President or Vice-Presidents if actual meal costs exceed the per diem allowance. Reimbursement using actual meal costs is also subject to the times mentioned above under the meal per diem method for the first and last day. Receipts required for reimbursement.

D. Other Expenses

Other expenses include business telephone calls, faxes, copier charges, tips, etc. Note: Tips are included in the M&IE per diem and cannot be claimed here if using the per diem method. If using actual costs for meals, then tips for other than meals, i.e., baggage handling, may be claimed in this category.

E. Travel consisting of one day or less

The following expenses will be reimbursed when travel involves one day or less:

1. Transportation expenses.
2. Registration fees.
3. Meals – Meals, for travel that involves one day or less, do not qualify for tax-free reimbursement. (See “Overnight” rule above.) Therefore, TVCC will not reimburse for meals on one-day travel. Exceptions are “business entertainment meals”. These are meal costs incurred (a) attending a convention, reception, banquet, seminar, meeting, civic club, etc., and **meal is at such place**, or (b) providing a meal directly before, after or during a substantial business discussion, i.e., recruiting students and buying the meals. Receipts are required.
4. Other miscellaneous business expenses – telephone, faxes, etc.

F. Student travel reimbursement

Students may be reimbursed for the same travel expenses as employees except the meal per diem (M&IE) is \$6.00 per meal. Actual cost method is also available for students, but is limited to \$6.00 per meal. The President or Vice-Presidents must approve exceptions to the \$6 limitation on actual cost. Faculty responsible for trip may request meals for students on the Request for Travel Authorization form. This may be done on the same form as the one the faculty turns in for all costs of the trip. After travel is complete, a Travel Report form must be turned in. Attach Student Meal Allowance form showing each student has signed acknowledging receipt of meal money. If actual cost method is used, receipts must be attached.

G. Reimbursement by agency funds

Clubs using agency funds for travel should request advancements on the Request for Travel Authorization form. Agencies may use the M&IE per diem or actual cost for meals. If actual meal costs are used, agencies are subject to “reasonable” cost. **Note: You cannot use the meal per diem using TVCC funds and then request additional meal money (which would require actual receipts turned in to support reimbursement) using agency funds or vice versa. This violates the IRS tax regulation requiring the same method to be used for the entire trip.** When trip is completed Travel Report forms must be turned in reconciling TVCC funds and Agency funds travel advancements with actual expenses. Please contact the Dean of Fiscal Services for further discussion on use of agency funds for travel expenses.

## SECTION V: TAXABLE TRAVEL REIMBURSEMENTS

Per IRS regulations that allow for travel reimbursement to be excluded from taxable income, failure to comply with the guidelines and procedures as outlined above could result in travel advancements and/or reimbursements to be included in taxable income.

It is the employee's responsibility to follow TVCC's travel policies and procedures to avoid inclusion of travel advancements/reimbursements in taxable income. If such should occur, the Business Office will notify the employee of travel reimbursements that will be added to taxable income. Taxable wages will be adjusted accordingly and applicable withholding, social security and medicare tax will be deducted on the employee's paycheck.

## **SECTION VI: FORMS**

Travel forms may be obtained in the Business Office.

### **A. Request for Travel Authorization**

The Request for Travel Authorization form is the official document to initiate travel requirements. This form must be submitted and approved prior to the date travel is to commence. See examples of completed form.

### **B. Travel Report**

The Travel Report form is used to reconcile travel advances (even if no advances were requested, i.e., \$0) to actual travel expenses. Original receipts must be submitted with the Travel Report form. Differences in advancements and actual expenses will result in (1) advances greater than actual expenses and excess returned to TVCC, (2) advances less than actual expenses and reimbursement due employee, or (3) advances equal actual expenses. See examples of completed form.

### **C. Student Meal Allowance Form**

The form is used to document student's receipt of meal money. It must show the date of travel, destination, student's name, amount of money received, and student's signature. Example of form attached.

### **D. Hotel Tax Exemption Form**

Employees traveling on business for Trinity Valley Community College present this form upon check-in at hotel to claim exemption of Texas state taxes. Example of form attached.

**Trinity Valley Community College  
Business Office  
REQUEST FOR TRAVEL AUTHORIZATION**

Purchase Order # \_\_\_\_\_

Name: Trinny T. Vallee Campus/Dept.: Athens/Counseling  
 Departure Date: 8-5-1999 Destination: Houston  
 Return Date: 8-9-1999 Purpose of Travel: TACRAO Meeting

The office of the Dean of Physical Facilities must be contacted in advance to determine if any institutional vehicle is available. Users of institutional vehicles will not be eligible to claim mileage, but will be reimbursed for gasoline purchased.

**ESTIMATED EXPENDITURES**

A. Personal vehicle _____ @ 25 cents per mile	\$	
B. Institutional Vehicle - Gasoline to be purchased (Acct.# 3240-048)	\$	20.00
C. Fares (air, bus, car rental, parking, tolls, taxi, etc.)	\$	25.00
D. Hotel	\$	448.00
E. Meals (Breakfast \$6.00, Lunch \$8.00, Dinner \$12.00)	\$	92.00
F. Other (telephone, etc.)	\$	
G. Registration fee (attach registration form)	\$	100.00
<b>TOTAL EXPENSES:</b>		<b>\$ 685.00</b>

Special Instructions: Need TACRAO ASAP. Return all checks to requestor for mailing

Please write check to:

1. <u>Wyndham Anatole Hotel</u> Payee _____ Address _____ _____ \$ <u>448.00</u> Total amount of check	2. <u>TACRAO</u> Payee _____ Address _____ _____ \$ <u>100.00</u> Total amount of check	3. <u>Trinny T. Vallee</u> Payee _____ Address _____ _____ \$ <u>137.00</u> Total amount of check														
<table border="0" style="width: 100%;"> <tr> <td style="text-align: center;">Acct #</td> <td style="text-align: center;">Amount</td> </tr> <tr> <td style="text-align: center;"><u>5555-043-1</u></td> <td style="text-align: center;"><u>448.00</u></td> </tr> </table>	Acct #	Amount	<u>5555-043-1</u>	<u>448.00</u>	<table border="0" style="width: 100%;"> <tr> <td style="text-align: center;">Acct #</td> <td style="text-align: center;">Amount</td> </tr> <tr> <td style="text-align: center;"><u>5555-043-1</u></td> <td style="text-align: center;"><u>100.00</u></td> </tr> </table>	Acct #	Amount	<u>5555-043-1</u>	<u>100.00</u>	<table border="0" style="width: 100%;"> <tr> <td style="text-align: center;">Acct #</td> <td style="text-align: center;">Amount</td> </tr> <tr> <td style="text-align: center;"><u>5555-043-1</u></td> <td style="text-align: center;"><u>117.00</u></td> </tr> <tr> <td style="text-align: center;"><u>3240-048-1</u></td> <td style="text-align: center;"><u>20.00</u></td> </tr> </table>	Acct #	Amount	<u>5555-043-1</u>	<u>117.00</u>	<u>3240-048-1</u>	<u>20.00</u>
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Acct #	Amount															
<u>5555-043-1</u>	<u>117.00</u>															
<u>3240-048-1</u>	<u>20.00</u>															

Business Office PO# \_\_\_\_\_ Business Office PO# \_\_\_\_\_ Business Office PO# \_\_\_\_\_

Trinny J Vallee 7-15-99  
 Requestor Date V/P or Dean Date

\*\*Out of State travel must be approved by the President. Travel Report form must be submitted upon return

EXAMPLE - TRIP 1

# CONFERENCE 1999 REGISTRATION FORM

You may complete and return this form or REGISTER ONLINE at [www.tacrao.org](http://www.tacrao.org). Click on the TACRAO Annual meeting logo. Complete one form for each participant (attendee, guest, exhibitor, other) in any meeting or extra-meeting activity. Send corrections or cancellation to [reg\\_tacconf@admin5.hsc.uth.tmc.edu](mailto:reg_tacconf@admin5.hsc.uth.tmc.edu).

First Name Trinity Middle Name/Initial T  
 Last Name Vallee  
 Name you prefer for badge Trinity T. Valle  
 I am attending as the Guest of \_\_\_\_\_  
 Institution Trinity Valley Com. College Title Counseling  
 email tvcc@tvcc.cc.tx.us Phone 903-677-TVCC Fax 903-677-TVCA  
 Street 100 Cardinal Drive City Athens State TX Zip 75751

**Check all descriptions which apply to you (meeting attendees only):**

- |   |  |                                    |
|---|--|------------------------------------|
| <input type="checkbox"/> Attending first TACRAO meeting | <input type="checkbox"/> Past President  | <input type="checkbox"/> Presenter |
| <input type="checkbox"/> 1999-2000 Executive Committee  | <input type="checkbox"/> Honorary Member | <input type="checkbox"/> Exhibitor |
| <input type="checkbox"/> Committee Member               |  |                                    |

If you have special needs (such as dietary restrictions), please indicate here: \_\_\_\_\_

The events listed below have the indicated fee associated with them. Please indicate those events in which you plan to participate and whether you need transportation to pre-meeting events. Meeting events are open to guests at the fee indicated.

<b>Meeting Registration (Meeting Registration for 1<sup>st</sup> Exhibitor is included in the Exhibitor Fee)</b>		
<input checked="" type="checkbox"/> Attendee	<input type="checkbox"/> Honorary Member	<input type="checkbox"/> 1 <sup>st</sup> Exhibitor
<input type="checkbox"/> Additional Exhibitor	<input type="checkbox"/> Guest (events only)	<input type="checkbox"/> Weekend Workshops only
<b>\$100 per attendee or additional exhibitor</b>		<b>\$ <u>100.00</u></b>

<b>Extra-Meeting Events-For registrants and guests</b>			
The TACRAO Mad Scramble (Sunday)	<input type="checkbox"/> yes	<b>\$50</b>	\$ _____
Golf Handicap _____ Need transportation	<input type="checkbox"/> yes		
Galveston 5K Fun Run/Walk/Glide (Tuesday)	<input type="checkbox"/> yes	<b>\$7</b>	\$ _____
Tours -TACRAO will provide scheduled transportation to the following tour areas. The participant will be responsible for any entry fee(s) upon arrival at the place of interest. Click on Tours at <a href="http://www.tacrao.org">www.tacrao.org</a> for more information. Please select 'yes' if you need transportation to a tour.			
Saturday -Galveston Historic Homes, Mansions, and Palaces Tour	<input type="checkbox"/> yes		
Saturday-"Shop 'Til You Drop" Tour (The Strand)	<input type="checkbox"/> yes		
Sunday -Galveston Historic Homes, Mansions, and Palaces Tour	<input type="checkbox"/> yes		
Sunday-"Shop 'Til You Drop" Tour (The Strand)	<input type="checkbox"/> yes		
Workshop for New Registrars (Sat, 9 a.m.-noon)	<input type="checkbox"/> yes	<b>\$25</b>	\$ _____
New Admissions/Recruiter Workshop (Sat 10 am-4 pm)	<input type="checkbox"/> yes	<b>\$25</b>	\$ _____
Coordinating Board Workshop (Sat 1-5 p.m.)	<input type="checkbox"/> yes	<b>\$10</b>	\$ _____
EDI Users Group Meeting (Sun 9 am.-noon)	<input type="checkbox"/> yes		

EXAMPLE TRIP 1

**Trinity Valley Community College Business Office**

**TRAVEL REPORT**

*(To be completed upon return within 15 days of travel)*

Name: Trinny T. Vallee Campus/Dept.: Athens/Counseling

Destination: Houston

Purpose of Travel: TACRAO Meeting

Date of Travel: 8-5-1999 to 8-9-1999 Requested P.O.#: 44321

	(1)ADVANCE PAYMENTS	(2) ACTUAL EXPENSES	(3)BALANCE (Col. 1- Col.2)
<b>A. Personal Vehicle</b> _____ Miles @25 cents	_____	_____	_____
<b>B. Gasoline Purchase for TVCC Vehicle* (#3240-048)</b>	<u>20.00</u>	<u>10.00</u>	<u>10.00</u>
<b>C. Fares (air, bus, car rental, parking, tolls, taxi, etc.)*</b>	<u>25.00</u>	<u>2.00</u>	<u>23.00</u>
<b>D. Hotel*</b>	<u>448.00</u>	<u>488.32</u>	<u>-40.32</u>
<b>E. Meals (Breakfast \$6.00, Lunch \$8.00, Dinner \$12.00)</b>	<u>92.00</u>	<u>92.00</u>	<u>0</u>
Departure Date: <u>8-5-1999</u> Time: <u>6:00 pm</u>			
Return Date: <u>8-9-1999</u> Time: <u>7:30 pm</u>			
<b>F. Other (telephone, etc.)*</b>	<u>0</u>	<u>3.30</u>	<u>-3.30</u>
<b>G. Registration Fee*</b>	<u>100.00</u>	<u>100.00</u>	<u>0</u>
<b>Total Each Column:</b>	(1) <u>685.00</u>	(2) <u>695.62</u>	(3) <u>-10.62</u>

**If total of column 1 is greater than total of column 2:**

Total column (1) \_\_\_\_\_ Minus Total column (2) \_\_\_\_\_ = \_\_\_\_\_ AMOUNT DUE TVCC

Receipt#: \_\_\_\_\_

**If total of column 2 is greater than total of column 1:**

Total column (2) 695.62 Minus Total column (1) 685.00 = 10.62 AMOUNT DUE

**EMPLOYEE**

**DEPARTMENT ACCOUNT #'S CHARGED FOR AMOUNT DUE TO TVCC OR DUE TO EMPLOYEE**

ACCT #: 5555-043-1 AMOUNT: 20.62

ACCT #: 3240-048-1 AMOUNT: -10.00

ACCT #: \_\_\_\_\_ AMOUNT: \_\_\_\_\_

Trinny T. Vallee 8-19-99  
REQUESTOR DATE

\_\_\_\_\_  
V.P./DEAN APPROVAL DATE

\*Receipts or itemization of actual expenses must be attached.

EXAMPLE TRIP 1

RETAIL SALES RECEIPT

**Mobil** The energy to make a difference.

P.O. Box 22001  
TULSA, OK 74121-2001  
TEL. 1-800-225-9547

You agree that sales on this form are subject to the retail charge (retail installment credit) agreement with the person whose account number is shown below. If you use a ATM/Debit card, this copy is your payment record. Total includes a 10¢ fee for Mobil + cash advances.

SALES ASSOCIATE	AUTO TAG NO.	STATE	DRIVER LICENSE NO.	STATE
-----------------	--------------	-------	--------------------	-------

FCO-85 POSCL (3-96)

CUSTOMER COPY

INVOICE #: 12345      8/08/1999 07:33PM  
SUNMART 168      Houston, TX  
DEALER: 9620691      AUTH #: 31

ITEM	QTY	PRICE	AMOUNT
UNLEAD	6.998 gal	1.429	10.00

*Jenny Valle* TAX 0.00  
**X Thank You For Our BUSINESS!** \$10.00  
 CUSTOMER SIGNATURE TO REPORT A LOST/STOLEN CARD CALL 1-800-552-1223

EXAMPLE TRIP 1

**HARRIS COUNTY  
TOLL ROAD  
AUTHORITY  
SAM HOUSTON SOUTH**

Lane: 3  
8/05/99 FARE PAID \$ 1.00

**HARRIS COUNTY  
TOLL ROAD  
AUTHORITY  
SAM HOUSTON SOUTH**

Lane: 3  
8/09/99 FARE PAID \$ 1.00

EXAMPLE TRIP 1

# WYNDHAM ANATOLE HOTEL

TRINITY VALLEY COLLEGE  
ATHENS, TX  
75751

Arrival  
Departure  
No. Guests  
Rate

8/05/99  
8/09/99  
2  
112.00

Room No.                      Group ID                      C/I Clerk                      Acct. No.

No.	Date	Description	0802TAN	RXO	1806457	Amount
<b>A-STANDARD FOLIO</b>						
1	8/05/99	CASH	996	1		\$488.32CR
2	8/05/99	LOCAL CALL/SALES TAX 18:25	996		Business	\$0.55
3	8/05/99	ROOM RATE	996	3806		\$112.00
4	8/05/99	9% CITY ROOM TAX	996	3807		\$10.08
5	8/06/99	1-800 ACCESS FEE 17:21	996		Business	\$0.55
6	8/06/99	1-800 ACCESS FEE 22:22	996		Business	\$0.55
7	8/06/99	1-800 ACCESS FEE 22:24	996		Business	\$0.55
8	8/06/99	ROOM RATE	996	4555		\$112.00
9	8/06/99	9% CITY ROOM TAX	996	4556		\$10.08
10	8/07/99	LONG DISTANCE CALL 23:26	996		Personal phone call	\$5.80
11	8/07/99	ROOM RATE	996	4214		\$112.00
12	8/07/99	9% CITY ROOM TAX	996	4215		\$10.08
13	8/08/99	LOCAL CALL/SALES TAX 16:51	996		Business	\$0.55
14	8/08/99	LOCAL CALL/SALES TAX 17:02	996		Business	\$0.55
15	8/08/99	ROOM RATE	996	871		\$112.00
16	8/08/99	9% CITY ROOM TAX	996	872		\$10.08
17	8/09/99	CASH	996	1		\$9.10CR
* BALANCE DUE						\$0.00
Company				Street	phone = 9-10	
City, State				3.30 Bus. phone calls		ZIP Code

Guest Signature

*Trinity F. Valles*

EXAMPLE TRIP 1

# CONFERENCE 1999 REGISTRATION FORM

You may complete and return this form or REGISTER ONLINE at [www.tacrao.org](http://www.tacrao.org). Click on the TACRAO Annual meeting logo. Complete one form for each participant (attendee, guest, exhibitor, other) in any meeting or extra-meeting activity. Send corrections or cancellation to [reg\\_tacconf@admin5.hsc.uth.tmc.edu](mailto:reg_tacconf@admin5.hsc.uth.tmc.edu).

First Name Trinny Middle Name/Initial T  
 Last Name Vallee  
 Name you prefer for badge Trinny T. Valle  
 I am attending as the Guest of \_\_\_\_\_  
 Institution Trinity Valley Com. College Title Counseling  
 email tvcc@tvcc.edu Phone 903-677-TVCC Fax 903-677-TVCC  
 Street 100 Cardinal Drive City Athens State TX Zip 75751

**Check all descriptions which apply to you (meeting attendees only):**

- |   |  |                                    |
|---|--|------------------------------------|
| <input type="checkbox"/> Attending first TACRAO meeting | <input type="checkbox"/> Past President  | <input type="checkbox"/> Presenter |
| <input type="checkbox"/> 1999-2000 Executive Committee  | <input type="checkbox"/> Honorary Member | <input type="checkbox"/> Exhibitor |
| <input type="checkbox"/> Committee Member               |  |                                    |

If you have special needs (such as dietary restrictions), please indicate here: \_\_\_\_\_

The events listed below have the indicated fee associated with them. Please indicate those events in which you plan to participate and whether you need transportation to pre-meeting events. Meeting events are open to guests at the fee indicated.

<b>Meeting Registration (Meeting Registration for 1<sup>st</sup> Exhibitor is included in the Exhibitor Fee)</b>		
<input checked="" type="checkbox"/> Attendee	<input type="checkbox"/> Honorary Member	<input type="checkbox"/> 1 <sup>st</sup> Exhibitor
<input type="checkbox"/> Additional Exhibitor	<input type="checkbox"/> Guest (events only)	<input type="checkbox"/> Weekend Workshops only
<b>\$100 per attendee or additional exhibitor</b>		<b>\$ 100.00</b>

<b>Extra-Meeting Events-For registrants and guests</b>			
The TACRAO Mad Scramble (Sunday)	<input type="checkbox"/> yes	\$50	\$ _____
Golf Handicap _____ Need transportation	<input type="checkbox"/> yes		
Galveston 5K Fun Run/Walk/Glide (Tuesday)	<input type="checkbox"/> yes	\$7	\$ _____
Tours -TACRAO will provide scheduled transportation to the following tour areas. The participant will be responsible for any entry fee(s) upon arrival at the place of interest. Click on Tours at <a href="http://www.tacrao.org">www.tacrao.org</a> for more information. Please select 'yes' if you need transportation to a tour.			
Saturday -Galveston Historic Homes, Mansions, and Palaces Tour	<input type="checkbox"/> yes		
Saturday-"Shop 'Til You Drop" Tour (The Strand)	<input type="checkbox"/> yes		
Sunday -Galveston Historic Homes, Mansions, and Palaces Tour	<input type="checkbox"/> yes		
Sunday-"Shop 'Til You Drop" Tour (The Strand)	<input type="checkbox"/> yes		
Workshop for New Registrars (Sat, 9 a.m.-noon)	<input type="checkbox"/> yes	\$25	\$ _____
New Admissions/Recruiter Workshop (Sat 10 am-4 pm)	<input type="checkbox"/> yes	\$25	\$ _____
Coordinating Board Workshop (Sat 1-5 p.m.)	<input type="checkbox"/> yes	\$10	\$ _____
EDI Users Group Meeting (Sun 9 am.-noon)	<input type="checkbox"/> yes		

EXAMPLE TRIP 1

**Trinity Valley Community College  
Business Office  
REQUEST FOR TRAVEL AUTHORIZATION**

Purchase Order # \_\_\_\_\_

Name: Cardi Nal Campus/Dept.: Athens/ Business Office  
 Departure Date: 10-5-2000 Destination: San Antonio  
 Return Date: 10-8-2000 Purpose of Travel: TAAE Conference

The office of the Dean of Physical Facilities must be contacted in advance to determine if any institutional vehicle is available. Users of institutional vehicles will not be eligible to claim mileage, but will be reimbursed for gasoline purchased.

**ESTIMATED EXPENDITURES**

A Personal vehicle _____ @ 25 cents per mile		\$ _____
B Institutional Vehicle - Gasoline to be purchased (Acct.# 3240-048)		\$ 25.00
C Fares (air, bus, car rental, parking, tolls, taxi, etc.)		\$ _____
D Hotel		\$ 182.73
E Meals (Breakfast \$6.00, Lunch \$8.00, Dinner \$12.00)		\$ 90.00
F Other (telephone, etc.)		\$ _____
G Registration fee (attach registration form)		\$ 150.00
<b>TOTAL EXPENSES:</b>		<b>\$ 447.73</b>

Special Instructions: \_\_\_\_\_

Please write check to:

1. <u>Menger Hotel</u> Payee <u>204 Alamo</u> Address <u>San Antonio, Tx 78205</u>  \$ 182.73 Total amount of check  <table border="0" style="width: 100%;"> <tr> <td style="width: 50%;"><b>Acct #</b></td> <td style="width: 50%;"><b>Amount</b></td> </tr> <tr> <td><u>8888-043-1</u></td> <td><u>182.73</u></td> </tr> </table>	<b>Acct #</b>	<b>Amount</b>	<u>8888-043-1</u>	<u>182.73</u>	2. <u>TAAE</u> Payee _____ Address _____  \$ 150.00 Total amount of check  <table border="0" style="width: 100%;"> <tr> <td style="width: 50%;"><b>Acct #</b></td> <td style="width: 50%;"><b>Amount</b></td> </tr> <tr> <td><u>8888-043-1</u></td> <td><u>150.00</u></td> </tr> </table>	<b>Acct #</b>	<b>Amount</b>	<u>8888-043-1</u>	<u>150.00</u>	3. <u>Cardi Nal</u> Payee _____ Address _____  \$ 115.00 Total amount of check  <table border="0" style="width: 100%;"> <tr> <td style="width: 50%;"><b>Acct #</b></td> <td style="width: 50%;"><b>Amount</b></td> </tr> <tr> <td><u>8888-043-1</u></td> <td><u>90.00</u></td> </tr> <tr> <td><u>3240-048-1</u></td> <td><u>25.00</u></td> </tr> </table>	<b>Acct #</b>	<b>Amount</b>	<u>8888-043-1</u>	<u>90.00</u>	<u>3240-048-1</u>	<u>25.00</u>
<b>Acct #</b>	<b>Amount</b>															
<u>8888-043-1</u>	<u>182.73</u>															
<b>Acct #</b>	<b>Amount</b>															
<u>8888-043-1</u>	<u>150.00</u>															
<b>Acct #</b>	<b>Amount</b>															
<u>8888-043-1</u>	<u>90.00</u>															
<u>3240-048-1</u>	<u>25.00</u>															

Business Office PO# _____	Business Office PO# _____	Business Office PO# _____
<u>Cardi Nal</u>	<u>9-15-2000</u>	
<b>Requestor</b>	<b>Date</b>	<b>V/P or Dean</b>
		<b>Date</b>

\*\*Out of State travel must be approved by the President.

EXAMPLE TRIP 2

# CONFERENCE REGISTRATION:

Please print or type all information and list your name as you wish it to appear on your name badge.

Name: Cardi Nal

Title: Accounts Organization Name: Trinity Valley Community College

Address: 500 South Prairieville

City: Athens State: TX Zip: 75751

Tel: (903) 676-1111 Fax: (903) 675-1113

E-mail address: card@fvcc.cc.tx.us

## CHECK ALL ITEMS THAT APPLY TO YOU: (Casual attire encouraged)

- Institutional Member of TAAE     Non-Institution Member     1<sup>st</sup> time attendance  
(Conference/membership fees may be included in one payment).

Early Bird	or on-site	Total
<u>1</u> @ <input checked="" type="checkbox"/> \$150 Member	___ \$170 Member	\$ <u>150.00</u>
___ @ ___ \$175 Non-Member	___ \$195 Non-Member	\$ ___
___ @ ___ \$ 75 Student Fee	___ \$ 95 Student Fee	\$ ___
Day Pass: (\$85)		\$ ___
	<b>TOTAL AMOUNT DUE</b>	\$ <u>150.00</u>

A check, money order, or purchase order information, *made payable to TAAE*, for total amount due must accompany this form. Faxed registrations will only be accepted if using a purchase order.

Federal ID #74-2674202

Check one:  Check     Money order     Purchase order # \_\_\_\_\_  
Individuals registering on-site must pay registration fee by check or money order only.

## REGISTRATION INSTRUCTIONS:

Please complete the registration form and send it via mail or fax with method of payment to:

**TAAE Annual Conference Registration**  
c/o Rosie Flores  
College Relations Office



(Handwritten signature)

WACO #7 HEB  
2300 E. WACO DR.  
WACO, TX

EX 6183  
308846081 5487  
DATE 10/08/00 12:41  
PUMP  
GRADE MDCD  
GALLONS 14.293  
PRICE/GAL \$ 1.399  
FUEL SALE \$ 20.00  
APPROVED 905573

LOW LOW GAS N GO  
AT  
HEB

RAM STORE #1  
187 IH35 W.  
NEW BRAUNFELS TX STN #:00161188

PRODUCT	QTY	PRICE	AMOUNT
UNLEAD/S	9.873G	\$1.519	\$15.00
TAX	1EA	\$0.69	\$0.69

INV #:	8816508
AUTH#:	26052
CASHIER:	123
DATE:	10/08/00 10:05
TAX:	\$0.06
TOTAL:	\$15.75

03/01

SIGNATURE: \_\_\_\_\_

EXAMPLE TRIP 2

# MENGER HOTEL

204 Alamo Plaza  
San Antonio, Texas 78205

500 SO. PRAIRIEVILLE ST  
ATHENS TX 75751

Statement Date  
10-08-00

Account Number  
582RU PAGE 1  
CO:3140 ACB

Date	Reference	Description	Charges	Credits
10-05-00	CK-ADV	PAID BY CHECK		182.73
10-05-00	RV5420	ROOM SERVICE	12.70	
10-05-00	RG3140	ROOM CHARGE-GROUP	55.00	
10-05-00	LT3140	CITY OCCUPANCY TAX	4.95	
10-05-00	BT3140	BEXAR COUNTY OCC TAX	.96	
10-05-00	GV3140	GARAGE-	14.00	
10-05-00	TX3140	SALES TAX	1.10	
10-06-00	RG3140	ROOM CHARGE-GROUP	55.00	
10-06-00	LT3140	CITY OCCUPANCY TAX	4.95	
10-06-00	BT3140	BEXAR COUNTY OCC TAX	.96	
10-06-00	GV3140	GARAGE-	14.00	
10-06-00	TX3140	SALES TAX	1.10	
10-07-00	RG3140	ROOM CHARGE-GROUP	55.00	
10-07-00	LT3140	CITY OCCUPANCY TAX	4.95	
10-07-00	BT3140	BEXAR COUNTY OCC TAX	.96	
10-07-00	GV3140	GARAGE-	14.00	
10-07-00	TX3140	SALES TAX	1.10	
10-08-00	VM0936	██████████ EXP 03/01		58.00

*parking 45.80*      *240.73*  
*Room - 182.73*  
*Meal - 12.70* (Not allowed -  
 using meal  
 per diem allowan)

I agree that my liability is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay any part or the full amount of these charges. I also agree that all charges contained in this account are correct and any disputes or requests for copies of charges must be made within 5 days after my departure.

BALANCE DUE  
.00

EXAMPLE TRIP 2

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Please print or type all information and list your name as you wish it to appear on your name badge.

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 Title: Accounts Organization Name: Trinity Valley Community College  
 Address: 500 South Prairieville  
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 E-mail address: card@fvcc.cc.tx.us

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<u>    </u> @ <u>    </u> \$175 Non-Member	<u>    </u> \$195 Non-Member	\$ <u>    </u>
<u>    </u> @ <u>    </u> \$ 75 Student Fee	<u>    </u> \$ 95 Student Fee	\$ <u>    </u>
Day Pass: (\$85)		\$ <u>    </u>
<b>TOTAL AMOUNT DUE</b>		<b>\$ <u>150.00</u></b>

A check, money order, or purchase order information, *made payable to TAAE*, for total amount due must accompany this form. Faxed registrations will only be accepted if using a purchase order.  
 Federal ID #74-2674202

Check one:     Check     Money order     Purchase order # \_\_\_\_\_  
 Individuals registering on-site must pay registration fee by check or money order only.

**REGISTRATION INSTRUCTIONS:**

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**TAAE Annual Conference Registration**  
**c/o Rosie Flores**  
**College Relations Office**

EXAMPLE TRIP 2

# STUDENT MEAL ALLOWANCE

Date of Trip: \_\_\_\_\_ Destination: \_\_\_\_\_

	Student Name	No. of Meals	Amount Advanced	Signature
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				

# of Meals \_\_\_\_\_ X \$6.00 = Total \$ \_\_\_\_\_

## HOTEL OCCUPANCY TAX EXEMPTION FOR TEXAS STATE TAX ONLY

*Note: THIS CERTIFICATE WILL EXEMPT GUEST FROM STATE TAX ONLY. Certificate should be furnished to the hotel/motel. DO NOT send the completed certificate to the Comptroller of Public Accounts. This certificate does not require a number to be valid.*

Name of guest	
Address of guest (street and number, city, state, ZIP code)	
Name of exempt organization <b>Trinity Valley Community College</b>	
Address of exempt organization (street and number, city, state, ZIP code) <b>100 Cardinal Drive, Athens, Texas, 75751</b>	
Organization exempt status (Religion, charitable, educational, governmental) <b>Public Educational Institution</b>	

COPY

**GUEST CERTIFICATION:** I declare that I am an occupant of this hotel/motel on official business sanctioned by the exempt organization named above and that all information shown is true and correct.

<b>SIGN</b> Guest <b>HERE :</b>	Date
------------------------------------	------

**FOR HOTEL/MOTEL USE ONLY (OPTIONAL)**

Name of hotel/motel			
Address of hotel/motel (street and number, city, state, ZIP code)			
Method of payment (cash, personal check or credit card, organization check or credit card, direct billing, other)			
Room rate	Local tax	Exempt state tax	Amount paid by guest