

DEPT CLS

# Preparing the TEV Non-MSU Employee

USE THE MOST CURRENT FORMS-TA and TEV

## Travel Authorization

not required unless a student  
if more than one index will fund the travel, note the \$amt each index will cover  
traveler must provide a W-9 (if not in Banner as a Vendor)(Check FTMVEND)

Provide proof of travel  
Provide an itinerary if possible

## Travel Expense Voucher

A traveler: name and GID - Non Employee  
B Month/Year of Travel  
index number(s) correct? If more than one, note \$amt per each index  
if expense is more than index can cover, write lower amount and note "PER AVAILABLE BUDGET"

C description of trip: city, State; purpose of trip, name of conference or meeting

D departure Date/ times (am/pm)  
City to Bozeman for departures  
arrival Date/times (am/pm)  
Bozeman to city for arrivals

mode of travel-use approved codes (CA, RC,SC,PC, etc)  
If using Personal Vehicle (PC) and Claiming mileage-provide map showing shortest route and miles (Mapquest)  
Correct mileage rate: have traveler sign for high rate

lodging-current federal rate is \$94 per night  
"LODGING PROVIDED" if lodging is paid for by Dept

meals-should coincide with departure and arrival times  
"SOME MEALS PROVIDED" if provided by DEPT

other expenses  
if more than one reimbursable expense per day, print an adding machine tape for daily totals  
enter expenses on correct day on the TEV

reimbursement receipts  
Label ALL reimburseable receipts: INDEX #, REIMBURSE, NAME, DESCRIPTION ,AMOUNT , DATE ON TEV  
if original receipts are on thermal paper, make a copy and include with original receipt  
receipts must be one-sided  
must show they were paid and by what means (cc statements not acceptable)  
Lyft/Uber receipts-must include route information  
if any hand entry data in Columns , Attach adding machine tape

F mileage rate: have traveler sign for high rate  
personal car use with high rate  
exception traveler drives their car to airport (less than 25 miles one-way)

G list all other expenses (except lodging, meals, mileage) with date/description/amount  
if more than one expense per day, attach labeled adding machine tape total for each day

H List ALL pcard charges with description and amount

traveler's signature and approved supervisor's signature and date (OSP if required-4W, 436,437,438)