

## Reimbursement Guide for Faculty Travel Awards

### Planning for Travel

When planning for travel, in the lower 48 states, please use the US General Service Administration per diem rates for lodging and meals & incidentals at [Per Diem Rates | GSA](#). If the destination is Alaska, Hawaii, or a US territory please use the Department of Defense per diem rates at [Per Diem Rate Lookup | Defense Travel Management Office \(dod.mil\)](#).

**IMPORTANT NOTE:** *Please be aware that Faculty Travel Awards are restricted by the Fly America Act. This means that you should arrange international flights using domestic airlines, even when it is more expensive or less convenient to do so. Travel via foreign airlines cannot be reimbursed unless there is no other travel option. For more information about the Fly America Act please see [Fly America Act | GSA](#).*

### Reimbursement Checklist

Faculty Travel Awards are paid for by the Hunter College Research Foundation Fund. To be reimbursed, please provide the following:

Item	✓
<b><a href="#">RF Travel Expense Voucher and Request for Payment form.</a></b>	
<b><a href="#">RF Direct Deposit form.</a></b>	
<ul style="list-style-type: none"> <li>• For conferences/symposia – A copy of your invitation letter, program, or conference website link showing the name, location and dates of the conference.</li> <li>• For research/scholarship – A memo with a description of the research, location and dates of your research.</li> </ul>	
Your itemized receipts including boarding passes for travel by air or rail. <ul style="list-style-type: none"> <li>• Purchases of alcoholic beverages will not be reimbursed.</li> <li>• Hotel receipts must be the official hotel folio receipt, an email confirmation will not be accepted.</li> </ul>	
A copy of your credit card statements with your name and the date/costs of your relevant purchases (including Uber/taxi service) visible and your other purchases blacked out.	

## E-PAYMENT TRAVEL EXPENSE VOUCHER AND REQUEST FOR PAYMENT

### For E-payment Use Only

Traveler's Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### Box Must Be Checked

U.S. Citizen / Permanent Resident      Yes      No  
Permanent resident means the person is a green card holder

PRSY      -      -      Amount \_\_\_\_\_  
PRSY      -      -      Amount \_\_\_\_\_

**Purpose of Trip** \_\_\_\_\_

### Itinerary

Date						
Departure City						
Time						
Destination City						
Time						

### Expenses

If applicable to your trip, please enter the associated Privately Owned Vehicle (POV) mileage reimburse rate in the blue square. The current POV reimbursement rate see GSA's POV Mileage Rates (<https://www.gsa.gov/travel/plan-book/transportation-airfare-rates-pov-rates-etc/privately-owned-vehicle-pov-mileage-reimbursement-rates>). To access the POV reimbursement rate for a prior year, use the archived rates (<https://www.gsa.gov/travel/plan-book/transportation-airfare-rates-pov-rates-etc/privately-owned-vehicle-pov-rates/pov-mileage-rates-archived>.)

Transportation						
Lodging						
Meals						
Local Travel						
Auto-No. of Miles Traveled						
per mile						
Other Cost						
Other Cost						

Traveler certifies that this request is accurate and correct and that traveler endeavored to obtain best pricing for transportation and lodging expenses.

Total Expenses	
Less Advances	
Net Amount Due	

\_\_\_\_\_  
Signature of Claimant

\_\_\_\_\_  
Project Position

\_\_\_\_\_  
Approval Signature of PI

\_\_\_\_\_  
Date

## INSTRUCTIONS FOR EPAYMENT TRAVEL EXPENSE REQUEST

Refer to Travel sections of RF's on-line Project Director's Guide for details of Policy and Procedure. Reimbursement for expenses incurred during properly authorized business travel should be claimed within five days after completion of trip.

The completed form(s) and associated travel documents must be submitted to the Research Foundation of CUNY using our electronic Payment Request submission system. Only authorized users with access to the Payment Request System can create and submit Travel Advance Requests and Travel Reimbursement Requests. If you do not have access to the submission system, please forward the documentation to your contact at CUNY for submission. All documentation must be digital (preferably PDF).

1. Complete form in full and secure necessary approval signature.

- (a) Enter itinerary and expense data for each day of travel. Itinerary data should indicate time of departure or arrival of common carrier except as otherwise provided in governing N.Y. State guidelines.
- (b) Verify that the amounts claimed for meals and lodging are within the allowable per diem rates. For overnight travel 75% of the published per diem rate for meals is allowed for the first and last day of travel.
- (c) Cash advances (if appropriate) should be on the "Less Advances" line and deducted from total expenses to show net amount claimed by traveler.

Please attach copies of the documents below to the Payment Request for Travel Reimbursements.

- 2. Attach copies of the original receipts for expenses, such as airline or train tickets/itineraries, boarding passes, toll charges, car rental, limousine service, meeting registration, etc. Written justification must be provided for car rental. Receipts are not required for personal meals. For business meals, a detailed restaurant receipt and proof of payment are required, along with a list of attendees and statement of business purpose for the expenditure.
- 3. Attach copies of the conference brochure, seminar agenda, or other documentation to characterize the purpose of travel.
- 4. Attach copies of the hotel bill or other evidence of duration of trip.
- 5. Attach copy of Travel Advance Request (Form RF-040) if a travel advance was obtained and submit the Payment Request to the RF. Please note that the Payment Request system cannot be used if the amount of the advance exceeds the total of travel expenses, instead please make a check payable to Research Foundation of CUNY for the amount owed and attach to the RF Travel Expense Voucher Paper Document.
- 6. Payment for the net amount due the traveler will be issued after receipt of properly completed Travel Expense Voucher and Request for Payment and all required supporting documentation.
- 7. Consult the Project Director's Guide for the current mileage reimbursement rate.
- 8. Approval by Project Director or designee attests that travel was necessary for accomplishment of project. Where travel is restricted in the grant or contract, approval certifies that the trip was in conformance with such restrictions.

For assistance email us at [epayhelp@rfcuny.org](mailto:epayhelp@rfcuny.org) or call 212-417-8480.

**Direct Deposit (ACH) Authorization Form**

- Please Complete this form and return it to [ach\\_payments@rfcuny.org](mailto:ach_payments@rfcuny.org) , or if you prefer to fax the form: (212) 417-8369
- For complete accuracy, please attach a voided (Cancelled) check from your checking account and/or a deposit slip from your savings account, whichever is applicable. The details from the check/deposit slip would be used to verify the account details.
- For any questions or concerns please contact: (212) 417-8599

<b><u>Payee Name:</u></b>	<b><u>Bank/ Financial Institution:</u></b>

<b><u>ABA Routing Number:</u></b>	<b><u>City/ State:</u></b>
<b><u>Account Number:</u></b>	<b><u>Voided Check/ Deposit Slip Attached?</u></b>
<b><u>Please check the applicable option:</u></b>  Checking <input type="checkbox"/> Savings <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b><u>Email Address:</u></b>	<b><u>Telephone Number:</u></b>

<b><u>Address:</u></b>

I authorize The Research Foundation of the City University of New York and the above Financial Institution to send credit entries, as well as appropriate adjustments and debit entries to my account indicated above.

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