PAYMENT SERVICES
CSU BAKERSFIELD

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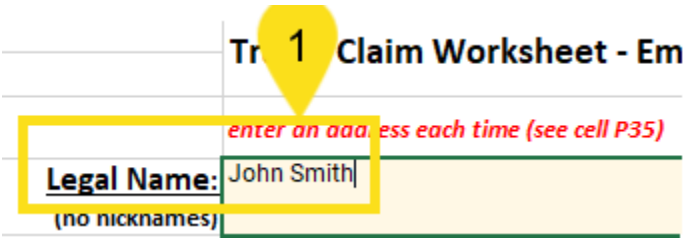
Travel Claim Worksheet

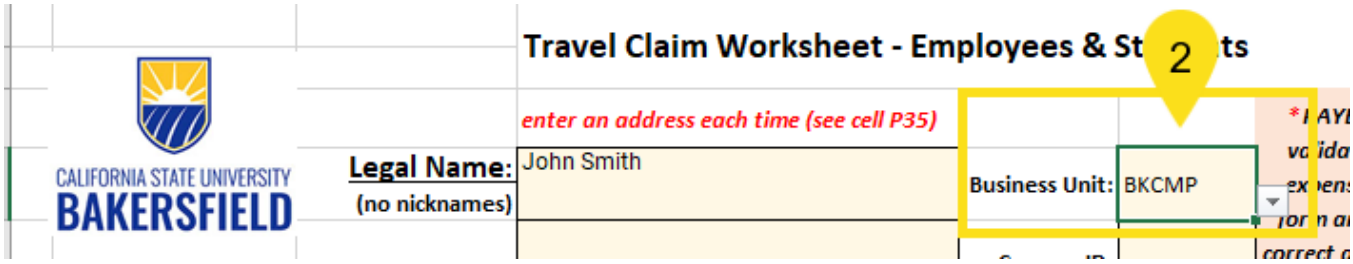
The form preparer will always need to access the **Travel Claim Worksheet – Employees & Students** form from the Campus Forms Gateway as routine changes and updates are made on a regular basis.

Traveler – General Information

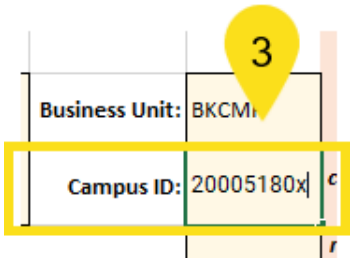
1. Enter the traveler's legal name. Please do not put nicknames, as this will make it harder to locate the traveler in CFS.



2. The form preparer must select the desired Business Unit (BU). Click the ▼ button, and a dropdown of all available BUs will appear.



3. Provide the traveler's CSUB ID number, which can be provided by the student, staff, or faculties ID card.



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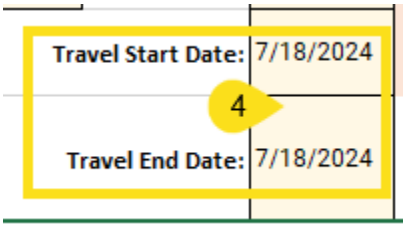
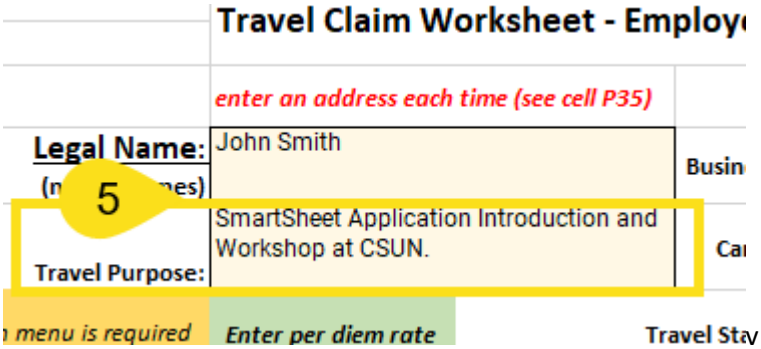
4. Input the traveler's start and end dates. The form preparer will receive a prompt if the total number of days differs from the detail section.)



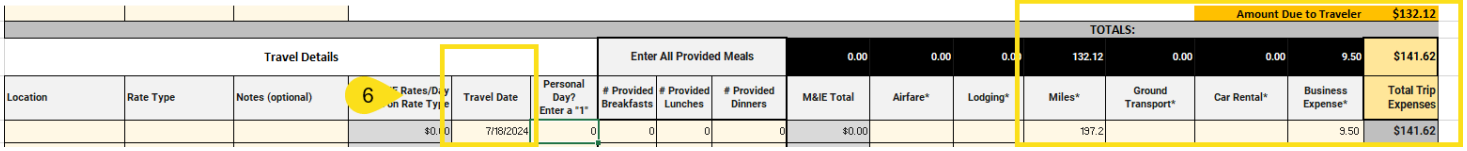
5. Enter a brief explanation of travel in the Travel Purpose box. It should explain the benefits to CSUB. (example: "Learning SmartSheet application for efficiencies in my department at the workshop at CSUN").



Travel Details

The Travel Details section allows you to itemize your trip day by day.

6. Information that must be provided under Travel Details must include
   a. Location – address of where you traveled to.
   b. Travel date(s)
   c. Total daily mileage (based on a detailed Google Map, that must be attached to the report.)
   Note: *When generating the Google map enter the address based on the starting point the trip.* When using CSUB use 9001 Stockdale Hwy, Bakersfield, CA 93311.



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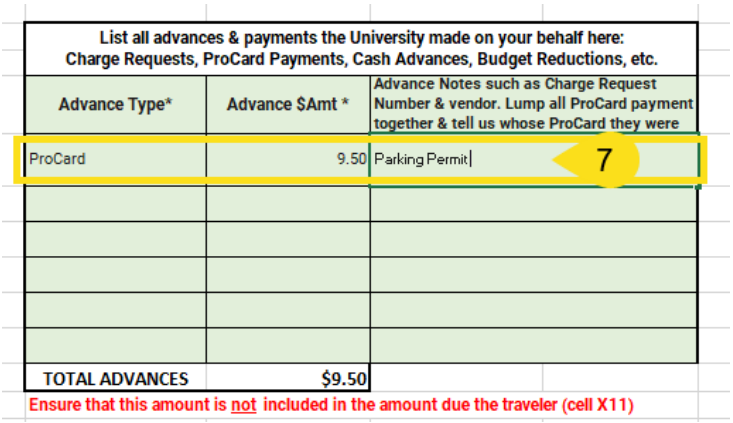
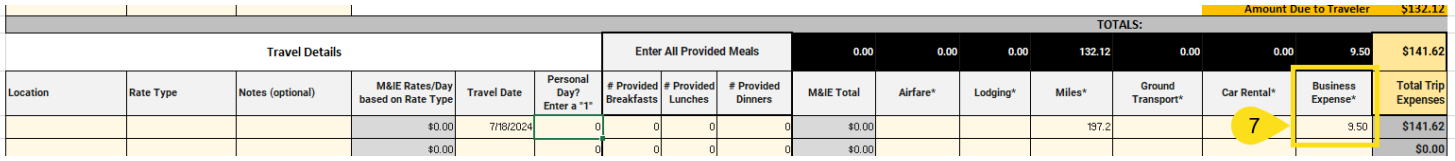
Advances & Payments

7. List any advances and payments the University made on your behalf in this section. (For example, anything paid for by the ASC's or PI's ProCard.) This amount will be deducted from your reimbursement. Please ensure the expenses are also included in the Travel Details as demonstrated below the advance type.



List all advances & payments the University made on your behalf here: Charge Requests, ProCard Payments, Cash Advances, Budget Reductions, etc.		
Advance Type*	**Advance $Amt ***	**Advance Notes such as Charge Request Number & vendor. Lump all ProCard payment together & tell us whose ProCard they were**
ProCard	9.50	Parking Permit
TOTAL ADVANCES	**$9.50**	

Ensure that this amount is not included in the amount due the traveler (cell X11)



																Amount Due to Traveler		$132.12
												TOTALS:						
Travel Details						Enter All Provided Meals			0.00	0.00	0.00	132.12	0.00	0.00	9.50	$141.62		
Location	Rate Type	Notes (optional)	M&IE Rates/Day based on Rate Type	Travel Date	Personal Day? Enter a "1"	# Provided Breakfasts	# Provided Lunches	# Provided Dinners	M&IE Total	Airfare*	Lodging*	Miles*	Ground Transport*	Car Rental*	Business Expense*	Total Trip Expenses		
			$0.00	7/18/2024	0	0	0	0	$0.00			197.2		7	9.50	$141.62		
			$0.00		0	0	0	0	$0.00							$0.00		

Charfields to be Charged and the Amount of Each

8. Enter the respective chartfield string for the correct respective department, grant or foundation account for which you are requesting reimbursement to be charged against.
    a. Account codes:
        i. Travel in state of California: 606001
        ii. All other states or international: 606002

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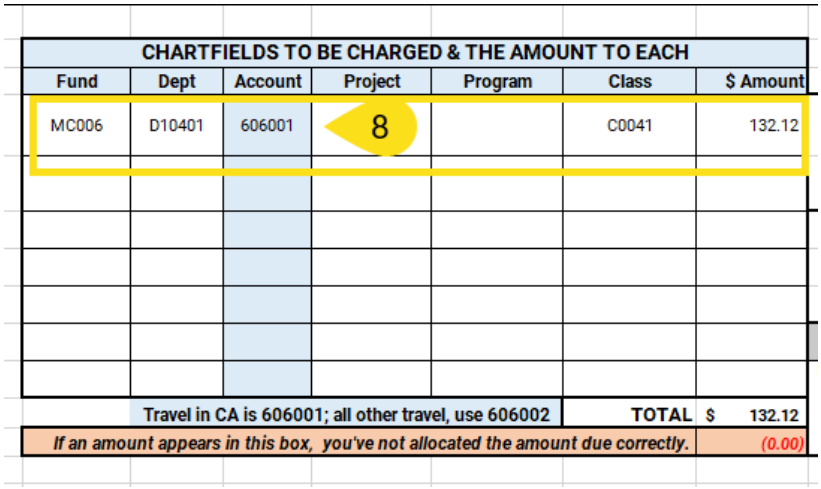

CHARTFIELDS TO BE CHARGED & THE AMOUNT TO EACH						
Fund	Dept	Account	Project	Program	Class	$ Amount
MC006	D10401	606001	8		C0041	132.12
	Travel in CA is 606001; all other travel, use 606002				TOTAL	$ 132.12
If an amount appears in this box, you've not allocated the amount due correctly.						*(0.00)*

Delivery Method

The delivery method indicates how the traveler wants to receive their reimbursement check. When an option is **not** selected, the form will default to mail. The form preparer can select to pick up the check (Payment Services will notify the traveler via email when the check is ready for pick at the Cashier's Office Window) or utilize the Electronic Funds Transfer (EFT) (this option is currently only available for BKCMP). Please have the traveler complete the EFT Form to enroll.

If selecting mail, please provide the traveler's home address in the **Payee's Home Address** Box below to ensure Payment Services sends the check to the correct location and avoid payment delays.

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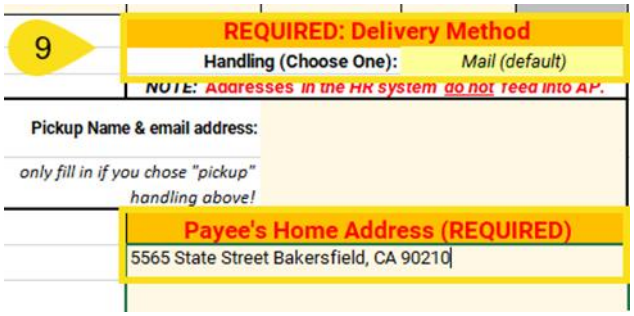
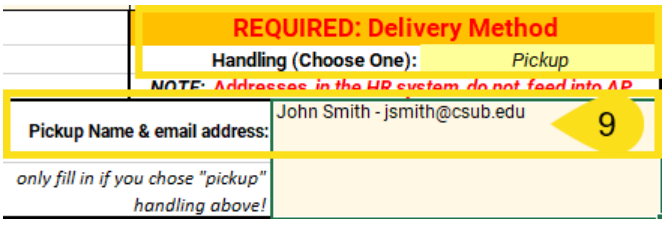
9. Mail check:



Pickup:



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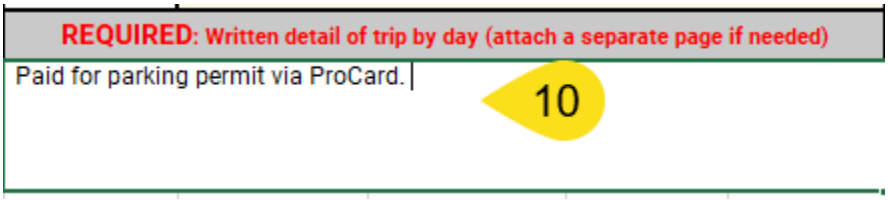
Notes: The notes section specifies any details related to the trip. These notes can assist Payment Services with a better understanding of what happened and when during the trip.

10. Enter dates and details. *(Example: 10/5/23 – Stayed at the conference hotel with dinner at Hodel's and mileage to a research lab that morning and evening).*



Signatures & Approvals:

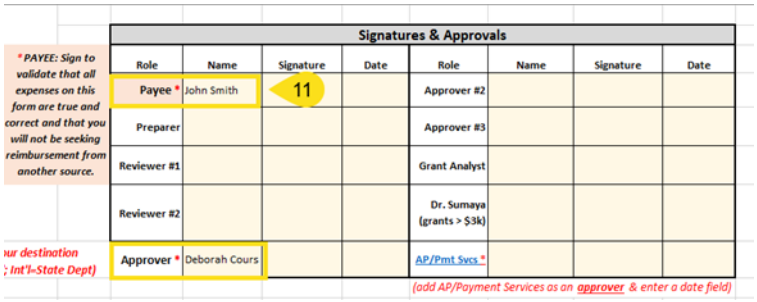
Once your Travel Claim Worksheet and backup documentation are complete, the preparer is now ready to add the needed approval signatures and route the report for approval signatures via Adobe Sign.

Signature definitions:

Payee (singer): Person requesting travel reimbursement

Preparer (signer): A person preparing Travel Claim Worksheet on someone's behalf

Reviewer (signer): Person reviewing the Travel Claim Worksheet (Budget Analyst, Dean, etc.)

Approver (signer): DOA who is approving the expense and reimbursement

11. Add your signature approvals – depending on your business unit (BU).