Researc	<b>H</b> h Foundati	Ion for Mental Hygiene,		avel Vou 2023	icher	Instructions: 1) Reimbursem 2) Each trip mu 3) All receipts, in 4) SUBMIT VO	st have a stated ncluding those of	d purpose an on RFMH cre	d destination dit cards, an	n listed. Id conference p			
SOCIAL SE	CURITY N	O. (Last 4 digits only)	FOREIGN	NATIONALS		LOCAL ACCOU		PROJECT	TASK	AWARD	E	XPENDITURE T	YPE
			RY & VISA TYPE					7		TRV Dome		RV Foreign Travel	
TRAVELER'S NAME & HOME ADDRESS								TRAVE	LER IS EMPL Check One	ER IS EMPLOYED BY: Check One → 8		NYS	Other
TRAVELER S NAME & HOME ADDRESS				Trip 1 Departure			Trip 1 Return			Purpos	e and Destinati		
	-		Date	Time	Check One	Date	Time	Check One	0-				
	2			5			6			9a			
Work Unit and Location Date				-	РМ		•						
				Trip 2 Departur Time	re Check One	Trip 2 Return Date Time C		Check One	Purpose and Destination of Trip 2				
			Date	Time		Date	Time		9b				
3							□_ PM						
DATE	TRIP #		N OF EXPEN	SES and MODI	E of	Personal Car Miles	Mileage Rate 0.655	LODGING	FARES	TOLLS	MEALS & INC EXP *	OTHER	TOTAL
10	11		12			13	0.00	14	15	16	17	18	\$ 0.00
							0.00						\$ 0.00
							0.00						\$ 0.00
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							0.00						\$ 0.00
							0.00						\$ 0.00
		I Expenses (M&IE) are li										AL EXPENSES	\$ 0.00
Diem. For d	US General Services Administration (GSA). For the first and last day of travel M&IE's Diem. For day travel, travelers are entitled to 75% of Per Diem if you are away from y				away from yo	from your official work station for more			LESS CASH ADVANCE or AMOUNT CHARGED TO RFMH CREDIT CARD FROM PAGE 2 \$ 0.00				
		trip includes meals paid s form your voucher us					ill need to	NET BALAN	CE DUE TO:	20	RFMH	TRAVELER	\$ 0.00
								DATE	TRAVELER	S SIGNATURE			
For Business Office Use				For Controllers Office Use				21					
								DATE		SIGNATURE	22		
									Print Approver's N	lame	23		

**The Travel Voucher is a fillable PDF form.** It will calculate your mileage, total by row, total all expenses, subtract cash advance/RFMH credit card charges and calculate the Net Balance Due. You may digitally sign the form and have the approver digitally sign as well. BE SURE TO USE THE APPROPRIATE YEAR'S VOUCHER FOR YOUR TRAVEL.

All numbered fields are mandatory when filling out Travel Vouchers. <u>For Expenditure</u> <u>Type</u>, you should enter either TRV Domestic Travel or TRV Foreign Travel. Refer to the numbered item below for specific details. Please note that ALL travel related expenses should be recorded here, whether you're seeking reimbursement or not. Ex. Lodgingstayed with friend; conference registration- paid by SAMSHA grant; transportation- car pooled; etc.

Completed travel vouchers are to be emailed to <u>Contracts@rfmh.org</u> with the word TRAVEL in the subject line, **no more than 2 weeks after travel**. Your timely submission assures travel expenses are applied to the appropriate project during the project period. Late submissions can be problematic, particularly if the project is closed. Incomplete or unapproved vouchers will not be processed.

## For the latest form visit

<u>http://corporate.rfmh.org/accounts\_payable/index.asp?page=travelforms</u>. The Travel Voucher is updated periodically.

19 Research Foundation for Mental Hygiene, Inc.					
Cash Advance Amount Description Date Amount					
List Items Charged					
contraction of the second seco					
	Total	\$ 0.00			

Page 2 of Travel Voucher

1	Your SSN will show as XXX-XX-#### so only the last 4 digits will appear.				
2	Your name and address must match the Substitute W-9 or payroll name and address on file. <i>If this is your first time submitting a Travel Voucher and you are not an RFMH employee, you will need attach a Substitute W-9 to be added to the Vendor file.</i>				
3	Include agency/bureau name with complete address.				
4	This is based on your location example: 550 CO OMH, 550 OASAS etc.				
	These vouchers are setup to accommodate 2 separate trips where 5 & 6 are for Trip 1; Trip 2 information should be included directly under 5 for departure, and directly under 6 for return. You will note the trip # if you have 2 trips on one voucher, see 11.				
5	Date & time must be present for departure.				
6	Date & time must be present for return.				
7	Type in your PTA #'s here; if you don't know what they are please consult your supervisor.				
8	Check the appropriate box based on your employer. Consultants should check Other.				
9	JUSTIFY WHY* you needed to travel and include destination city (and country if not USA.)				

	*The purpose of the trip must be stated in enough detail to establish that the travel expenditures incurred are direct business expenditures of the account to be charged. Notations such as "to attend a conference" are not enough to explain the relevance of the trip to the funding source. Accounts Payable will use this description, so be concise but complete.						
10	Date of the incurred expense.						
11	This will either be a "1" or a "2" based on the trip your expense was incurred. If you have only one trip on this voucher, all of these will be "1."						
12	One word/short phrase to explain the charge related to travel ex. Lodging, meals, mileage, car rental, train, etc. If you have more than one charge on the same day feel free to put more than one charge on the same line (see sample travel voucher below). You can be general or descriptive in nature i.e. lodging or hotel or Hilton; meals or per diem or meal per diem; train or Amtrak; etc.						
	Did you pay for all or part of another traveler's expenses? Make sure you include their full name next to the expense you paid for.						
	If you filled out a Pay Order for any trip expenses, please make sure you include the description and cost, follow the instructions immediately below in italics to take the cost out of the final reimbursement amount due to you.						
	If another person/grant/agency covered all or part of your travel expenses, the expense(s) should be listed on your travel voucher with the funding source(s) noted next to the description. The amount can be added to the voucher accordingly (13-18) & then noted on Page 2.						
13	If you used your personal vehicle for the trip, record mileage here.						
14	Hotel charges: Remember to attach a hotel receipt to confirm charges. For hotel stays in NY or NJ, there should be no taxes on receipt!						
15	Cab/Uber/Lyft Fares: Attach receipts to confirm charges.						
	Tolls: Attach receipts to confirm charges. If EZ Pass was used, ok to screen shot activity from your online account.						
17	Check the meal per diem based on your travel destination (city) via <u>https://www.gsa.gov/portal/category/100120</u> . If you stayed overnight, your destination city will be the city where your hotel is located.						
	•1 day of travel - entitled to 75% of the per diem for 12+ hours of travel. No per diem if less than 12 hours. Day trip meals are taxable and will be paid through payroll and appear on your paycheck.						
	•2+ days of travel - First & last day of travel you will need to calculate 75% of the per diem (per diem amount x 0.75.) Full days in between the first and last day are 100% of the per diem.						
	<ul> <li>conference/convention -         <ul> <li>2+ conference days: meals that were provided on conference days should be deducted from your daily allotted meal per diem. Visit GSA website to search for destination city &amp; state of your hotel, take note of the daily meal per diem that's listed all the way to the right in the table, then scroll down to Meals &amp; Incidental Expenses Breakdown link, click link &amp; reference chart to deduct whatever meals were included at the conference.</li> </ul> </li> </ul>						
	<ul> <li>1 conference day: because meals are already calculated at 75% for the first and last day of travel, no need to deduct conference meals. Please use 75% of the meal per diem.</li> </ul>						

19	List on Page 2 of this voucher: Any amounts that were charged on your RFMH issued credit card; <b>AND/OR</b> Paid directly by RFMH on your behalf; <b>AND/OR</b> Paid by an outside funding source; <b>OR</b> The sum of the cash advance you received for this trip.						
	The form will total the charges from Page 2 and calculate Net Balance.						
20	If the balance is due to you as the traveler, choose "TRAVELER." This is the amount you will be reimbursed. REMEMBER – if it is a day trip and you received a per diem, that portion will be paid in the paycheck following submission of your Travel Voucher to Accounts Payable.						
	If the balance will be due to RFMH choose "RFMH." You will be expected to reimburse RFMH that amount. Attach a check or money order so the Project is reimbursed.						
21	Your signature (the traveler) and date.						
22	The Principal Investigator or Authorized Signer on the grant being charged MUST sign and date.						
23	If not digitally signed, the Principal Investigator MUST print their name underneath their signature. We verify the Approver is authorized to sign the Voucher before it is sent for payment.						
	eceipts for travel expenses should be sent in with your travel voucher for any type of trip you take. Please bine with Travel Voucher into one PDF if possible.						
conf	a conference <b>INCLUDE A COPY OF YOUR EVENT REGISTRATION/FLYER/PROGRAM. It will need to include:</b> Terence dates, location & times; site hotel price (if this was where your overnight was); registration cost; Is that were included with your registration.						