

Section 1:

CTE Travel & Entertainment Reconciliation

See the [Form Guide](#) for help with filling out and submission

Important: Form must be filled out in [Adobe Reader 8](#) or above for form functionality

204 Submitted or on file. Note: If NOT on file, complete [Payee Setup 204](#) form

Document #: I

Vendor #:@

Date Due:

Enter all payments made to or on behalf of the traveler from Section 3 of corresponding TAR, CTE Card USBank Statement, or USBank Transaction History

Trip Number		
Expenses	TAR	CTE
Airfare		
Reg Fee		
Lodging		
Other		
Total		

Traveler's or Cardholder's Name:
(Last, First, M.)

Team Affiliation (Optional):

Traveler's Email:

Campus Mail Stop:

(or)Traveler's Address:

Affiliation

U.S. Citizen

Yes

No

Form Prepared By:

Dept / Division:

E-mail:

Phone:

Additional Notes (Optional):

Enter cash advances from UCSC

Cash Advance

Section 2:

All Actual Expenses: Enter the total expenses below from all payment methods for each business purpose. To itemize expenses see attached [TERF Worksheet](#).

Business Purpose									Total Expense	Description of Expense:	
Date											
Business Expense Type	Entertainment	Travel	Entertainment	Travel	Entertainment	Travel	Entertainment	Travel			
	Supplies	Other	Supplies	Other	Supplies	Other	Supplies	Other			
Destination											
Personal Car Mileage (1/1/2019)											
Personal Car Mileage Reimbursement (58 ¢ /mile)											
Airfare *											
Rental Car * (excludes insurance)											
Other Transportation											
Parking/Tolls											
Conference Registration *											
Lodging (room + tax only) *											
Meals & Incidentals (\$62 max/day or (O) CONUS/diem)											
Misc. & Supplies (Explain)											
Entertainment (explain with ERA)											
TOTALS:										Total of all actual expenses	
<div><div>* Must submit original itemized receipts regardless of amount</div><div>Traveler's certification: I certify the above are actual expenses incurred by me while on official University business per the dates shown, and that the original receipts are attached for each expense of \$75.00 or more, per UC policy (G-28). I certify that I have complied with CA's auto liability insurance law while operating my personal auto on University business.</div></div>									<Less payments made on behalf of traveler>		All actual Travel/Entertainment expenses paid for with the CT&E card are not reimbursed, so reduce from the actual expense total
									<Less Cash Advance>		Cash Advance is reduced from total expenses
									Reimbursement or <Payment Due>		Amount due back to Cardholder, auto populates line one of reimbursement, may be split funded by clicking the custom amount box.

Section 3: Reimbursement to Traveler Check box if split funding reimbursement						
Fund	Organization	Account	Activity	Amount	Description of Expense	Doc. Ref. Number

Section 4: Transfer of Expense Check box if your department will process TOE(s)						
Fund	Organization	Account	Activity	Amount	Description of Expense	Doc. Ref. Number
Payment Due From Traveler:			TOE Total:		Credit to Default Cardholder FOAPAL:	

Traveler Signature Required Date:

Traveler's certification: I certify the above are actual expenses incurred by me while on official University business per the dates shown, and that the original receipts are attached for each expense of \$75.00 or more, per [UC policy \(G-28\)](#). I certify that I have complied with CA's auto liability insurance law while operating my personal auto on University business.

Tier 1: Signature Required: Date:

Funding Authorization (PI, Fund Manager, Advisor)

Senior Officer Auth Signature: (If required) Date:

ETP- exception to policy

Tier 2: Signature Required: Date:

Funding Authorizer Verification (Advisor, Research Accountant)

Other Departmental Approvals: (If required) Date:

Ex. Other Departmental Expense Authorizer