

## **Personnel Policy**

## The Pay Plan Payment of Travel Expenses

Number: Article Revisions: III; Section 18

Effective Date: July 22, 2014

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Town of Swansboro

Supersedes:

Administrative Policy # 7

Approved By:

M March

ARTICLE III.

THE PAY PLAN

Section 18.

**Payment of Travel Expenses** 

Expenses incurred as a part of the job for travel and training purposes with the Town will be reimbursed at the mileage rate set by the IRS, lodging paid at actual reasonable costs, and meals at the established per deim rate will below which will be used for meals if traveling outside of a fifty-mile (50) radius. The per diem and IRS rates will be reviewed annually by the Human Resource Manager:

- ➤ Breakfast-\$8.00
- > Lunch-\$10.00
- Dinner- \$19.00

General guidelines for travel and training expenses:

- a) Travel and training requests must be funded within approved budget line items
- b) Travel and training requests (including registration fees, lodging, transportation and advance requests) must be prepared on a "Travel Advance Request Form" with an approval from the department head and town manager

If the travel request does not include registration fees, lodging or overnight travel, the "Mileage Reimbursement Request Form" can be used in lieu of the "Travel Advance Request Form".

- c) Travel expenses shall reflect correct and complete expenditures that were incurred by the requesting party.
- d) No reimbursement shall be allowed for the spouse of Town Commissioners, Town Manager, and employees. If for convenience airfare or hotel registration are booked at the same time as the traveler for spouse or travel companion, reimbursement to the Town must be paid as soon as possible.

- e) No reimbursement shall be allowed where those costs are incurred and accounted for by another person (i.e., two persons traveling in one vehicle cannot claim duplicate mileage/travel costs).
- f) Subsistence shall be reduced for any meals or lodging included in the conference, seminar or meeting registration.
- g) A complete "Travel Advance Request Form", with original receipts attached, must be submitted to the Finance Department within seven (7) working days of return if not turned in ten (10) days prior to departure.
- h) All travel must be by a usually traveled route (google earth, yahoo maps or equivalent). If a person travels by an indirect route for personal convenience, any extra costs will be at the traveler's expense.
- i) If Town travel is combined with personal travel, the traveler must indicate such on the Travel Advance Request Form. The traveler will only be reimbursed for those expenses that are clearly Town related. Meals and lodging will only be in effect during the actual period of time spent on official Town business.
- j) A photocopy of the program or agenda of the conference, seminar or meeting itemizing meals, lodging or fees must be attached to the Travel Advance Request Form.
- k) No receipts are required for per diem rates. Meals which exceed these limits by reason of location or type of function will be the employees responsibility unless prior approval by the Town manager.

Per diem costs and mileage allowance will be verified by the Finance Department at the time each form is received.

Attachments: Travel Advance Request Form
Mileage Reimbursement Request Form

## TOWN OF SWANSBORO

		IMPORTANT NOTICE	By signing and submitting this form	you agree that the requested funds will be used for the purposes stated	in this form. Failure to provide an	expense report with receipts within 10 days of volit retrien date can	result in a paycheck deduction to	cover the amount of funds advanced	to you.	PRINT FORM IN BLACK AND	WHILE ONLY		Date Approved	Date Signed
	C										00'0\$			
Cava - Agvairae Kealuest	Date Submitted	Traveler Name	Traveler Address	E-mail Address	Phone	Department	Destination	Departure Date	Return Date	Purpose of Travel	Total Advance Requested	Employee Signature	Dept. Head Signature	Town Manager Signature

Grand Total		
00'0\$	т стор се до пределения на при доста до предвержения пред	Miscellaneous
)10\$		Meals
)*0\$		Hotel
0 0		Conference/Registration Fees
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		Fransportation/Mileage
	N/A	Airfare Transportation/Mileage

## TOWN OF SWANSBORO

MILE	MILEAGE REIMBURSEMENT REQUEST FOR (Nan	(Name Month/Year)
DATE	LOCATION/PURPOSE	MILES
TOTAL MILES		0
TOTAL AMOUNT DUE	Mileage rate .56	\$0.00
DATE SUBMITTED		
APPROVED BY (SIGNATURE)		
DATE APPROVED		
ACCOUNT NUMBER		