

## **Travel Expense eForm (TE)**

# Add Travel Expense Form Step 1 of 2: Select Traveler

If yes:	st Approved for this Tra	aver?		•			
,		Travel Request#:					
		oyee/Affiliate ID:					
	Trav	veler First Name:					
	Tra	veler Last Name:					
			SEAF	RCH	CLEAR		
State" (trave	enses for this trip consi eling to or within DC or lete Travel Expense	Maryland)?		,	•		
Form Information							
Expense eForm ID:	Pre-filled	Requested Date:	Pre-fille	ed			
Initiator Information	on						
Name: Pre-filled				User ID	: Pre-filled		
Email: Pre-filled				Phone:	Pre-filled	l	
Initiating Dept: Pi	re-filled				of this inform formation in		t, please correct ontact HR.
	pleted, this inform	ation is pre-fill	ed:				
Traveler Informati	on						
*Traveler Type:							
*Purpose Type:							
*Describe the Bene	efit to UMB:						
*Travel Agency:							
Explain why the TR	EQ is late: Box appears if TR is	late.					



# Expense to be reimbursed to someone other than Traveler? $\hfill \Box$

If yes, the following box appears:

Reimbursee Information											
*Reimbursee Type:		If Oth	er or Student, the SSN is	needed.							
*Does this person have SSN?			If No, Visa Number is re	quired.	*SSN/Visa Num	ber:					
*First Name:					*Last Name:						

If employee is the recipient, this box is pre-filled:

Check Address	Check Address												
*Country:													
*Address Line 1:													
*Address Line 2:													
*City:													
*State:			*Postal Code:										

Choose Types of E	Expenses You Are Claimir	ng		
Meals	Lodging	Transportation	Mileage	Other



### ADMINISTRATION AND FINANCE

Itinerary																
Row	Departure Date	Departure Tir	ne Departing From	To Country	Country Name	To State	State Name	To City/Region	Local Arrival I	Date Local Arrival Time	Auto Mileage	Commute Miles(to be subtracted)	Total Miles	Mileage Expense Amount		
1													Pre-filled	Pre-filled	+	
2													Pre-filled	Pre-filled	+	
Over 60	days Travel Retui	rn? 🔲 (F	Pre-filled)													
	Fro	m Date:	Pre-filled	Pre-fill Per Di	iem Amount	s?:										
		To:	Pre-filled	Lodging:	Pre-filled	Lu	unch:	Pre-filled		Create Expense R	ows					
Estimated Expense Grand Total: Pre-filled Breakfast: Pre-filled			D	inner:	Pre-filled											

Expense Ch	Expense Chart																
Date	Breakfast	Lunch	Dinner	Lodging	Shuttle/Taxi	Air/Rail/Bus	Auto Rental	Parking Fee	Bridge or Tolls	Phone/Internet	Registration	Tips	Other	Unreimbursed Amount(to be subtracted)	Daily Total		
																+	
																+	

Expense Grand Total: Pre-filled

*Was any portion of
your trip for personal
reasons?



## If yes, the following box appears:

Please enter the	dates		
From Date	To Date		
		+	

Explain	Expenses:
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Submit



Univ	University Funding												
Row	Find Chartstring	PCBU	Project ID		Owner Dept		Program	Fund	Account	Transaction Dept ID	Amount	+	
1	Find Chartstring	Pre- filled		Pre-filled		+							
2	Find Chartstring	Pre- filled		Pre-filled		+							
	Remainder to be Distributed: Pre-filled. Should be 0.00.												

١	Form Messages								
			Message Text	<u>Description</u>					
		A	Acknowledge compliance with policies and procedures	I certify that the expenses listed on this form comply with applicable UMB policies and procedures (http://www.umaryland.edu/policies-and-procedures/library/financial-affairs) and have not been previously submitted for payment.					

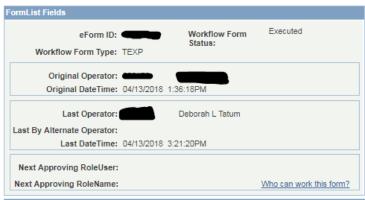
Fi	File Attachments												
	Upload	View	<u>Description</u>	Attachment Id									
1	Upload	View		Pre-filled	Delete								
2	Upload	View		Pre-filled	Delete								

Add File Attachment	
Comments	<< Previous
	Save as Draft
Your Comment:	
Comment History:	



#### View Travel Expense Form

#### Step 2 of 2: Form History





Transaction Log							
	Current DateTime	Role Name	<u>User ID</u>	User Description	Form Action	Workflow Form Status	
	04/13/2018 1:36:18PM	UMB_EF_TRAVEL_ADMINISTRATOR			Submit	Pending	
	04/13/2018 2:40:11PM	UMB_EF_TRAVELER			Approve	Part Apprv	
3	04/13/2018 2:41:50PM	UMB_EF_TRAVEL_SUPERVISOR			Approve	Part Apprv	
4	04/13/2018 2:41:50PM	UMB_EF_TRAVEL_APPROVER			Approve	Part Apprv	
	04/13/2018	UMB_EF_TRAVEL_APPROVER			Approve	Part Apprv	
6	04/13/2018 3:21:24PM	UMB_EF_TRAVEL_FINSVC			Authorize	Authorized	

#### Form Messages

