## Penobscot Nation

Submitting a Request for Travel Advance

## When to submit a request for a travel advance

- Travel advances are required for all non-local. This is any overnight travel or travel that exceeds 10 hours. This also includes any travel that may be paid for by an outside organization as the form also serves as an Authorization to travel.
- Travel advances are given to Penobscot Nation employees only.
- If you need extra travel advance forms, you can call the Finance Office and either pick them up or we can put them in interoffice mail for you.
- They should be submitted to the Finance Office with your departments weekly check requests each Wednesday by 3PM.
- Please see Penobscot Nation's Travel Policies for further information on travelling for the Nation in general.

## **APRIL 2022** SUN MON TUE WED THU FRI SAT 3 Submit Travel Adv. Request 10 14 11 12 15 16 13Receive Travel Advance (at the latest) 17 18 19 20 21 22 23 Return Depart 24 25 26 27 28 29 30 Holidays and Observances: 17: Easter Sunday, 18: Easter Monday, 18: Tax Day Wiki Calendar

# When to submit a request for a travel advance

Example: Your travel dates are Sunday, April 17 to Thursday, April 21, 2022. See the calendar to the right to see when your travel advance request would be due.

All travel advance requests are due each Wednesday with the regular weekly check requests so it is important requests are submitted early so a check can be printed before you leave.



Traveler's Name

## Request for Authorization and/or Advance

(for employees for non-local travel)

Travel Dates: from: / / to

lust have documentation;	: Please attach an	y letters/worksh	op brochures to ver	rify purpose of travel)
ESTIMA	TED EXPENSES	Max Lodging Rat	e: Org#:	Obj#:
		Ś	3007 400	
	Expense		Paid/Source	Projected Amount
&IE per Federal Register:			(CC= Credit Car	
te: paid at full rate for each			(CK = Check)	refree part and or the
y you attend event and	\$	X da		\$
5% of full rate for both the	\$	X 2 days(759	6) =	\$
ny you reave and recom		Total M&		and Lucia
odging (\$ /night X	nights			\$
onfirm #:				
ileage ( miles X	¢/mile)			\$
ane/Bus/Train Fare	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			\$
ixi Fare				\$
aggage Fees				\$
olls				\$
arking				\$
ental Car				\$
ther	Lawrence and appropriate		201 20 V D 201 2 D 2 D 2 D 2 D 2 D 2 D 2 D 2 D 2 D 2	\$
tal Travel Cost:				\$
ess pymts made by other s	ources (CC, Check	, etc)	e January Sparragiu	\$
		Total Advan	ce	\$
bmit a travel expense report	t with supporting re will be issued to em	ceipts and any am aployees with trave	ount due Penobscot N I advances not closed	of Penobscot Nation. I agree to lation within 10 (ten) working I out with a report. I understa
Signatures verify acco	eptance of the a	bove Terms	Reviewe	d by Finance Office
Traveler:		Date:	Voucher#	
Supervisor:	·		Check#:	Amount\$
			Clanada	Vendor#

# Filling out the request for a travel advance

Fill out the top section with your name, projected travel dates, program, destination, purpose of travel and ORG and OBJ codes your trip is being charged to.



Program/Dept

## Request for Authorization and/or Advance

(for employees for non-local travel)

Travel Dates: from: \_\_\_\_/\_\_\_to \_\_\_\_

ESTIMAT	ED EXPENSES	Max Lodging Rate	: Org#:	Obj#:
&IE per Federal Register: ote: paid at full rate for each ay you attend event and 5% of full rate for both the ay you leave and return	\$\$	_Xday	)	
oaging (\$ /night X	nignts			\$
onfirm #:				
ileage ( miles X	¢/mile)			\$
ane/Bus/Train Fare				\$
axi Fare				\$
aggage Fees				\$
olls				\$
arking				\$
ental Car				\$
ther				\$
otal Travel Cost:				\$
ess pymts made by other so	urces (CC, Check	etc)	0 1,11 mlJ 3 / <u>2</u> 27 1331UC	\$
ess pyrites made by other so	rai ces (ce, cireck	Total Advanc		\$
bmit a travel expense report additional travel advances v ree that unsupported and/or Signatures verify acce	with supporting re vill be issued to en unreported travel ptance of the a	eceipts and any amo apployees with travel expenses will be de	unt due Penobscot N. advances not closed ducted from my pay. Reviewe	of Penobscot Nation. I agree to ation within 10 (ten) working of out with a report. I understar by Finance Office
Traveler:				
Supervisor:				Amount\$
		100000000000000000000000000000000000000	signea:	Vendor#

## Filling out the request for a travel advance – Per Diem

Fill in your estimated M&IE (Per Diem). Penobscot Nation pays the US General Services Administration (GSA) per diem rates for travel within the United States which can be found here <a href="https://www.gsa.gov/travel/plan-book/per-diem-rates">https://www.gsa.gov/travel/plan-book/per-diem-rates</a>



(for employees for non-local travel)

Fraveler's Name	Travel Dat	rest from: / /	to / /
rogram/Dept	Destinat	on:	<del></del>
Purpose of Travel:			the second section of the second
Must have documentation;	Please attach any letters/wo	rkshop brochures to ve	rify purpose of travel)
ESTIMAT	ED EXPENSES Max Lodging	Rate: Org#:	Obj#:
1620 L 40 H: 1142	, max cought	, note:	A. Resour
	S	B-14/6	B. C. A. A. A.
M&IE per Federal Register:	xpense	Paid/Source (CC= Credit Car	
Note: paid at full rate for each	70 2	(CK = Check)	
day you attend event and	\$ 79 x 3	davs =	\$ 237.00
75% of full rate for both the day you leave and return	\$ 59.25 X 2 days	(75%) =	
ady you reave and recom	Total	M&IE	\$355.50
Loaging (\$ /night X	nignts		\$
Confirm #:			
Mileage ( miles X	¢/mile)		\$
Plane/Bus/Train Fare			\$ 2000 1 000000000
Taxi Fare			\$
Baggage Fees		CONTRACTOR OF STREET	\$
Tolls			\$
Parking			\$
Rental Car			\$
Other			\$
Total Travel Cost:			\$
Less pymts made by other so		ny te e Justi 3 s. 2 manu	\$
	Total Ad	lvance	\$ nameunitizani
ubmit a travel expense report to lo additional travel advances w	with supporting receipts and an	y amount due Penobscot f travel advances not closed	of Penobscot Nation. I agree to Nation within 10 (ten) working days d out with a report. I understand a
Signatures verify acce	ptance of the above Term	s Reviewe	ed by Finance Office
Traveler:	yd bowpien?	_ Date:	Voucher#
State of the state		H	
		_   Check#:	Amount\$

## Filling out the request for a travel advance – Per Diem

Travel days are paid at 75% of the GSA rate. For example, your trip from April 17<sup>th</sup> to 21<sup>st</sup> is to Washington, DC.

The GSA rate for Washington, DC is \$79/day.

Per diem would be paid as follows:

April 17<sup>th</sup> \$59.25

April 18<sup>th</sup> \$79.00

April 19th \$79.00

April 20<sup>th</sup> \$79.00

April 21st \$59.25



(for employees for non-local travel)

Program/Dept	Destination:		
Purpose of Travel:			Service Service
Must have documentation; Please attach a	any letters/workshop	brochures to verify	purpose of travel)
ESTIMATED EXPENSES	Max Lodging Rate:	Org#:	Obj#:
M&IE per Federal Register:  Note: paid at full rate for each day you attend event and 75% of full rate for both the day you leave and return  Expense  *    M&IE per Federal Register:	X daysX 2 days(75%)X 2 days(75%)	plit = V . I !	\$
Lodging (\$ /night X nights			\$
Confirm #: Mileage ( miles X ¢/mile) Plane/Bus/Train Fare Taxi Fare Baggage Fees Tolls Parking Rental Car Other			\$ \$ \$ \$ \$ \$
Less pymts made by other sources (CC, Chec		THE PARTIES	\$
	Total Advance		\$ nomeons

Terms: These costs specified above are to be incurred in performance of official business of Penobscot Nation. I agree to submit a travel expense report with supporting receipts and any amount due Penobscot Nation within 10 (ten) working days. No additional travel advances will be issued to employees with travel advances not closed out with a report. I understand and agree that unsupported and/or unreported travel expenses will be deducted from my pay.

Signatures verify acceptance of the above Terms	Revie	ewed by Finance Office
Traveler:		Voucher#
Supervisor:	Check#:	Amount\$
Director:	Signed:	Vendor#

## Filling out the request for a travel advance – Expenses

The purpose of this is to show the ESTMIATED cost of the travel.

Include ALL expenses, even if something has been paid by credit card or check already.



(for employees for non-local travel)

Program/Dept	Destination:		<u> </u>
Purpose of Travel:			tergent to see
Must have documentation; Please attach	any letters/workshop	brochures to verify	purpose of travel)
ESTIMATED EXPENSE	Max Lodging Rate:	Org#:	Obj#:
	\$	20 234	
Expense	(1)	Paid/Source	Projected Amount
M&IE per Federal Register:		(CC= Credit Card)	
Note: paid at full rate for each		(CK = Check)	
	Xdays		\$
day you leave and return \$	X 2 days(75%)		\$
	Total M&IE		
Lodging (\$ /night X nights			\$
Confirm #:			
Mileage ( miles X ¢/mile)			\$
Plane/Bus/Train Fare			\$
Taxi Fare			\$
Baggage Fees			\$
Tolls			\$
Parking			\$
Rental Car			\$
Other		OVER THE RESERVE OF LEGIS	\$
Total Travel Cost:			\$
Less pymts made by other sources (CC, Che		TO HU DE PROBUGE	\$
-	Total Advance		\$ noneunit

Terms: These costs specified above are to be incurred in performance of official business of Penobscot Nation. I agree to submit a travel expense report with supporting receipts and any amount due Penobscot Nation within 10 (ten) working days. No additional travel advances will be issued to employees with travel advances not closed out with a report. I understand and agree that unsupported and/or unreported travel expenses will be deducted from my pay.

nance Office
cher#
ount\$
dor#
n

# Filling out the request for a travel advance – Lodging

Your lodging rate should not exceed the GSA rate for the location you are travelling to (found here

https://www.gsa.gov/travel/plan-book/per-diem-rates)



(for employees for non-local travel)

Program/Dept		Destination:		entrys.
Purpose of Travel:				Segui e
Must have documentation;	Please attach an	y letters/workshop	brochures to verify	purpose of travel)
ESTIMA	TED EXPENSES	Max Lodging Rate:	Org#:	Obj#:
M&IE per Federal Register:	Expense	\$	Paid/Source (CC= Credit Card)	Projected Amount
Note: paid at full rate for each day you attend event and 75% of full rate for both the day you leave and return		_Xdays X 2 days(75%)		\$
Lodging (\$ /night X	nights			\$
Confirm #:				
Mileage ( miles X	¢/mile)			\$
Plane/Bus/Train Fare				\$
Taxi Fare				\$
Baggage Fees				\$
Tolls				\$
Parking				\$
Rental Car				\$
Other	Lawrence and annual and	AUTHOR SERVICE	NAME OF BRIDE PARK OF THE OWNER.	\$
Total Travel Cost:				\$
Less pymts made by other s	ources (CC, Check	, etc)	THE STATE OF THE S	\$
		Total Advance		\$

Terms: These costs specified above are to be incurred in performance of official business of Penobscot Nation. I agree to submit a travel expense report with supporting receipts and any amount due Penobscot Nation within 10 (ten) working days. No additional travel advances will be issued to employees with travel advances not closed out with a report. I understand and agree that unsupported and/or unreported travel expenses will be deducted from my pay.

Signatures verify acceptance of the above Terms		ewed by Finance Office
Traveler:		Voucher#
Supervisor:		Amount\$
Director:	Signed:	Vendor#

# Filling out the request for a travel advance - Mileage

For personally owned vehicles, Penobscot Nation pays the GSA rate which can be found here: https://www.gsa.gov/travel/plan-book/transportation-airfare-povetc/privately-owned-vehicle-povemileage-reimbursement-rates. Receipts are not required for fuel purchased.

If a Penobscot Nation vehicle is used, only the cost of fuel can be requested, and receipts will be required upon your return. You can request this in the "Other" section.



(for employees for non-local travel)

Program/Dept		Destination:		
Purpose of Travel:				<u> </u>
Must have documentation	; Please attach an	y letters/workshop	brochures to verify	purpose of travel)
ESTIMA	TED EXPENSES	Max Lodging Rate:	Org#:	Obj#:
		Ś		Important view of sur 1994
	Expense	T	   Paid/Source	Projected Amount
M&IE per Federal Register:	Expense		(CC= Credit Card)	Projected Amount
Note: paid at full rate for each			(CK = Check)	to the plant dealer the
day you attend event and 75% of full rate for both the	\$	_Xdays	(	\$
day you leave and return	\$	X 2 days(75%)	\$550 m = mm 2 3	\$
		Total M&IE		
Lodging (\$ /night X	nights			\$
Confirm #:				
Mileage ( miles X	¢/mile)			\$
Plane/Bus/Train Fare				\$
Taxi Fare				\$
Baggage Fees				\$
Tolls				\$
Parking				\$
Rental Car				\$
Other				\$
				·
Total Travel Cost:				\$
Less pymts made by other s	sources (CC, Check		-	\$
		Total Advance		\$

Signatures verify acceptance of the above Terms		wed by Finance Office
Traveler:	Date:	Voucher#
Supervisor:	Check#:	Amount\$
Director:	Signed:	Vendor#

## Filling out the request for a travel advance -**Totaling Expenses**

If an expense has been prepaid by a credit card or check, mark it in the middle column.

Total all expenses to get your estimated Total Travel cost.

Subtract any expenses that have been paid already from the Total Travel Cost. Usually this would be expenses like registration and airfare.

The difference of Total Travel Cost and expenses already paid is your Total Travel Advance.



(for employees for non-local travel)

Traveler's Nam	ne:	1	_ Travel Dates: from	m:/	_to/
Program/Dept.			Destination:		
Purpose of Tra	vel:				to an
(Must have doo	cumentation	; Please attach an	y letters/workshop	brochures to verify	purpose of travel)
	ESTIMA	TED EXPENSES	Max Lodging Rate:	Org#:	Obj#:
M&IE per Feder	ral Register:	Expense	\$	Paid/Source (CC= Credit Card)	Projected Amount
Note: paid at full day you attend e 75% of full rate I day you leave an	rate for each event and for both the	\$\$	Xdays X 2 days(75%) Total M&IE	(CK = Check)	\$
Lodging (\$	/night X	nights			\$
Confirm #:					
Mileage (	miles X	¢/mile)			\$
Plane/Bus/Trair	n Fare				\$
Taxi Fare					\$
Baggage Fees					\$
Tolls					\$
Parking					\$
Rental Car					\$
Other		e la mentale de la managa de	AUDINA SE STANCO	SAN SHOW BUTTON ON LIKE Y	\$
Total Travel Cos	st:				\$
Less pymts ma	de by other s	ources (CC, Check	etc)	Then the Salaman	\$
			Total Advance		\$ 27783776.24

agree that unsupported and/or unreported travel expenses will be deducted from my pay

Reviewed by Finance Office		
Date:	Voucher#	
	Amount\$	
Signed:	Vendor#	
	Date:	

## Required Attachments

Attachments are required to verify the purpose of your travel including any available agendas, letters or brochures for the training/workshop/meeting/confe rence you are attending.

Examples of expenses requiring attachments are hotel confirmations, airfare confirmations, registration confirmations and rental confirmations.

Expenses like parking, tolls, baggage fees, taxi fare, etc. do not require any attachments since they are only estimates. Receipts for these items will be required upon return instead.



(for employees for non-local travel)

Drogram /Dont		Doctination		
Program/Dept		Destination:		
Purpose of Travel:				the state of the s
(Must have documentation	n; Please attach an	y letters/workshop	brochures to verify	purpose of travel)
ESTIMA	ATED EXPENSES	Max Lodging Rate:	Org#:	Obj#:
		\$	1.00	
	Expense	*	Paid/Source	Projected Amount
M&IE per Federal Register:			(CC= Credit Card)	Projected Amount
Note: paid at full rate for each			(CK = Check)	
day you attend event and	\$	Xdays		\$
75% of full rate for both the day you leave and return	\$	X 2 days(75%)	dplr	\$
, ,	2	Total M&IE	F 15	files as 1 no no
Lodging (\$ /night X	nights			\$
Confirm #:				
Mileage ( miles X	¢/mile)			\$
Plane/Bus/Train Fare	a			\$
Taxi Fare				\$
Baggage Fees				\$
Tolls				\$
Parking				\$
Rental Car				\$
Other				\$
Total Travel Cost:				\$
Less pymts made by other	sources (CC, Check		70.00 33.7131003	\$
		Total Advance	1	\$
submit a travel expense repo	ort with supporting re s will be issued to em	eceipts and any amou aployees with travel a	int due Penobscot Nati advances not closed ou	Penobscot Nation. I agree to on within 10 (ten) working days at with a report. I understand a
Signatures verify ac	ceptance of the a	bove Terms	Reviewed	by Finance Office
Traveler: D		Pate:Voucher#		
Supervisor:			Check#:	_Amount\$
Director:			Signed:	Vendor#

## Submitting the request for a travel advance

The traveler, supervisor and Director all need to review the travel advance request and sign to accepts the terms and authorize the travel.

Ensure all required attachments are attached to the request with a paper clip. This is a complete packet.

Submit to Shannon Smith in Finance. She will check for accuracy then give to Grants & Contracts for the compliance signature.

Checks will be delivered to your department with the vendor (red) checks.



Grant/Budget Compliance Signature:

## Request for Authorization and/or Advance

(for employees for non-local travel)

Traveler's Name:		Travel Dates: from	m:/	_to//
Program/Dept				
Purpose of Travel:				Congress and the second
(Must have documentation;	Please attach an	y letters/workshop	brochures to verify	purpose of travel)
ESTIMA	TED EXPENSES	Max Lodging Rate:	Org#:	Obj#:
		\$		
	Expense		Paid/Source	Projected Amount
M&IE per Federal Register:	Expense		(CC= Credit Card)	The state of the s
Note: paid at full rate for each			(CK = Check)	
day you attend event and	\$	X days	(CK = CHECK)	\$
75% of full rate for both the	\$	X 2 days(75%)		\$
day you leave and return	4	Total M&IE		•
Lodging (\$ /night X	nights	1000111000		\$
Confirm #:	riigitto			4
Mileage ( miles X	¢/mile)			\$
Plane/Bus/Train Fare	4/11mc/			\$
Taxi Fare				\$
Baggage Fees				\$
Tolls				\$
Parking				\$
Rental Car				\$
Other	Lawrence and the second		200 H	\$
Total Travel Cost:	<u>Resource(resource(resource)</u>	anne de la company de la compa		\$
Less pymts made by other s	ources (CC, Check	, etc)	The state of the s	\$
		Total Advance		\$ management and
submit a travel expense report	t with supporting re will be issued to em	ceipts and any amoun	t due Penobscot Nat dvances not closed o	Penobscot Nation. I agree to ion within 10 (ten) working days ut with a report. I understand a
Signatures verify acco	eptance of the a	bove Terms	Reviewed	by Finance Office
Traveler:	State and State of the P	D	ate:	Voucher#
Supervisor:		с	heck#:	_Amount\$
		7 II		

Date:

## Submitting the request for a travel advance

The request for travel advance is a triplicate carbon copy form. The Finance Office will keep both the white and yellow copies and the pink copy will be attached to the check for the traveler.

The back of the pink copy is a different form for a travel closeout report which will be covered in the next section.

If you misplace the pink copy, please contact the Finance Office for a new one.



## PENOBSCOT INDIAN NATION

### **Travel Expense Report**

Traver's Name:	Travel D	ates: from://	to/
Program/Dept	Destinat	ion:	
Purpose of Travel:			
	Actual Expe	enses	
Expense M&IE per Federal Register: Note: paid at full rate for each day you attend event and 75% of full rate for both the	Max Lodging Rate:  \$ da	(CK = Check)	AMERICAN AND AND AND AND AND AND AND AND AND A
day year lance and cabusa	X 2 days X 75%	=	\$
Lodging (\$/night X			\$
Mileage (miles X			\$
Plane/Bus/Train Fare			\$
Taxi Fare			\$
Baggage Fees			\$
Tolls			\$
Parking			\$
Other			\$
Other			\$
Total Travel Cost:			\$
Less pymts made by other sources (CC, Che	eck, Other Agency Reimi	o) <b>–</b>	\$
Balance owed to Employee (if your advance	did not cover your expe	enses)	\$
Balance owed to Penobscot Nation (if your a	advance was more than	your expenses)	\$
Charge to: Org# Obj#			
Org#Obj#_		she:	
Reimbursements made BY Employee: R	eceipt #:	Amount:\$	Cash Check
Reimbursements made TO Employee: C	heck #:	Amount:\$	
Signatures: approval of the above expe	enses	Reviewed by	Finance Office
Traveler:		Date: V	endor#:
Grants & Contracts:		Check#: A	mount: \$
		Signed:	

## Travel Expense Closeout Report

A closeout report is due within 10 working days of your return.

The purpose of this report is to show your ACTUAL expenses and determine if an additional amount is owed to you or if there is a balance is owed back to the Nation.

Fill out all actual expenses to get your actual Total Travel Cost.

Again, subtract out expenses that were paid prior to the trip AND subtract out the amount of your advance. This will determine if there is a balance owed to you or the Nation.



## PENOBSCOT INDIAN NATION

## **Travel Expense Report**

Traver's Name: Trav	vel Dates: from:/ to/
Program/Dept Dest	tination:
Purpose of Travel:	
Actual E	Expenses
Expense  Max Lodging R.  Substituting the second of the second o	Paid/Source
Other	\$
Other	\$
Total Travel Cost:	\$
Less pymts made by other sources (CC, Check, Other Agency F	Reimb) = \$
Balance owed to Employee (if your advance did not cover your	
Balance owed to Penobscot Nation (if your advance was more	than your expenses) \$
Charge to: Org# Obj# Org# Obj#	
Reimbursements made BY Employee: Receipt #:	Amount:\$ Cash Check
Reimbursements made TO Employee: Check #:	Amount:\$
Signatures: approval of the above expenses	Reviewed by Finance Office
Traveler:	Date: Vendor#:
Grants & Contracts:	Check#: Amount: \$
	Signed:

## Travel Expense Closeout Report – Attachments

Receipts will be required for all travel expenses with the Expense Report.

Small receipts (tolls, parking, baggage, taxi etc.) must be taped to a piece of letter size (8.5" x 11") paper.



## PENOBSCOT INDIAN NATION Travel Expense Report

Traver's Name:			
Program/Dept	Destinatio	n:	
Purpose of Travel:			
	Actual Expen	ses	
Expense M&IE per Federal Register: Note: paid at full rate for each day you attend event and	Max Lodging Rate:	Paid/Source (CC = Credit Card (CK = Check)	Transport Street,
75% of full rate for both the \$	Xdays X 2 days X 75%	= -	\$
Lodging (\$/night X	nights		\$
Mileage ( miles X	¢/mile		\$
Plane/Bus/Train Fare			\$
Taxi Fare			\$
Baggage Fees			\$
Tolls			\$
Parking			\$
Other			\$
Other			\$
Total Travel Cost:			\$
Less pymts made by other sources (CC, Ch	eck, Other Agency Reimb)	-	\$
Balance owed to Employee (if your advance	e did not cover your expen	ses)	\$
Balance owed to Penobscot Nation (if your	advance was more than yo	our expenses)	\$
Charge to: Org#Obj#			
Org#Obj#_		10	
Olg#00j#_	Date		
Reimbursements made BY Employee: F	Receipt #:	Amount:\$	Cash Check
Reimbursements made TO Employee: 0	Check #:	Amount:\$	
		Daylowad by	Finance Office
Signatures: approval of the above exp	<u>benses</u>	Heviewed by	Finance Office
Traveler:	Da	te: V	endor#:
Grants &		neck#: A	Amount: \$
Contracts:	The state of the s		
	Si	gned:	

## Travel Expense Closeout Report

Ensure that the ORG and OBJ codes are filled in, so the Finance Office knows where to charge a balance back to you or where to deposit a balance owed back to the Nation.

Sign the form and submit with required attachments to Shannon Smith in Finance.

If a balance is owed to you, a check will be processed with your department's normal vendor (red) checks for the week.

If a balance is owed to the Nation, you can attach a check or contact Shannon Smith at 207-817-7311 to schedule a time to pay by cash or credit card. A receipt will be provided to you.