

APPENDIX J

INTERAGENCY COORDINATING COUNCIL TRAVEL EXPENSE WORKSHEET CHECKLIST

IMPORTANT CONSIDERATIONS

- ⇒ Travel reimbursement and receipts shall show only the ICC Member or Community Representative's name.
- ⇒ All expenses, including dates, must match the receipts submitted for each individual trip.
- ⇒ When booking your trip, it is recommended travelers choose the most economical, efficient, and least-costly method.
- ⇒ Travelers may use a costlier form of travel; however, reimbursement will be made only for the method/cost which is in the best interest of the State.

A. TRANSPORTATION

- Travel **Comparison Matrix** (*DS 2164b*) (Appendix I)- **Complete and include with your travel claim if you are claiming private vehicle mileage in lieu of air travel or driving a person vehicle in lieu of renting a car.**
- Airline **or Rail Receipt** - Include Final Itinerary from Concur. To request a copy of a travel invoice, select "Print My Invoice" from <http://www.caltravelstore.com/helpful-links>.
- Personal Vehicle Mileage** - Calculate your mileage from home to the airport or home to the meeting by using www.mapquest.com and print with the mileage shown. Renting a vehicle is the preferred mode of transportation. Complete the *Travel Comparison Matrix* and include with your claim if you decide to drive your personal vehicle in lieu of renting a vehicle.
 - ⇒ **Tips for drivers are not reimbursable.**
- Shuttle **Service** - Include your original receipt(s) for expenses over \$10.00.
- Taxi - Each original receipt must include the driver's name, taxi cab number, phone number, and date.

FOR DIRECT BILLING - To avoid paying out-of-pocket, travelers may bill DDS directly for taxi expenses. Each receipt must include the DDS Billing Code (**86152**), the name "Interagency Coordinating Council," and a signature. **All receipts must be submitted with your travel claim, no matter the cost.**

FOR REIMBURSEMENT - Receipts are required for any amount over \$10.00.

- Car Rental** - If applicable, submit the:
 - Pink rental receipt; and Approved Rental Car Authorization form
- Parking/Bridge Tolls** - Include your original receipt(s)

B. MEALS – NO RECEIPTS NEEDED, TRAVELERS RETAIN RECEIPTS IN CASE OF AN AUDIT

- All meals claimed are to be for the actual amount of expense, up to the maximum allowed. Travelers may **not** claim meals provided by the state, meals included in hotel expenses or conference fees, meals included in transportation costs such as airline tickets or meals that are otherwise provided.

C. LODGING

- Original receipt(s) must display a zero balance and show only the ICC Member or Community Representative's name. If applicable, submit the following:
 - A complete copy of the approved [Excess Lodging Rate Request/Approval form \(STD 255C\)](#) and all attachments; and
 - Written authorization, from DDS, for travel and per diem for the day prior to the meeting.

D. CHILD CARE REIMBURSEMENT

- Submit the following:
 - The *Childcare Reimbursement* form with an original signature from the provider including the child's name, dates, name of the provider, number of hours, cost per hour, total cost for care from the provider; and
 - The written approval from DDS, if travel was outside of California.