FORT HAYS STATE UNIVERSITY
Quick Reference
Fiscal Year 2016 Rates

Private Vehicle Mileage:

			Object Code:
Privately Owned Motorcycle	$0.54 per mile	In-State	525110
Private Vehicle at Motor Pool Rate	$0.22 per mile + estimated fuel	Out -of-State	525210
Private Vehicle at State Rate	$0.57 per mile*	International	525310

If a traveler chooses to take their private car, they will be reimbursed at the FHSU Motor Pool rate, which is $0.22 per mile plus an estimated cost for fuel, or the Hertz rate, whichever is less. To determine the lowest rate, complete the Personal Vehicle Mileage Reimbursement Form.

***If no FHSU motor vehicle is available, $0.57 cents per mile may be used for comparison to the Hertz rate.**

Lodging Expense/Reimbursement:

	Rate:	*Maximum Allowed: (Rate x 1.5)*	*Object Code:*
In-State/Border City	$83.00	$124.50	525180
Out-of-State (Regular)	$83.00	$124.50	525280
Out-of-State (High-Cost)	$159.00	$238.50	525280
Out-of-State (Special)	$178.00	$267.00	525280
International (including China)	Actual	Actual	525380

Lodging may be approved and reimbursed at 1.5 times the lodging rate (plus taxes). **If the lodging rate is over the maximum allowed, the lodging must be a conference hotel and a flyer must be provided to be reimbursed the full conference rate (plus taxes).** These lodging limits continue to be applied to the lodging rate before taxes. Thus, the amount reimbursed or paid for lodging expenses may exceed the limitation by the associated taxes.

Meal Allowance, Meal Deduction or One Day Meal Allowance:

	Breakfast	*Brunch or Lunch*	*Dinner*	*Object Code:*
In-State	$9.00	$12.00	$25.00	525180
Out-of-State (Regular)	$9.00	$12.00	$25.00	525280
Out-of-State (High-Cost)	$12.00	$16.00	$33.00	525280
Out-of-State (Special)	$14.00	$19.00	$38.00	525280
International*	$15.00	$21.00	$33.00	525380
China	$7.50	$10.50	$16.50	525380

*or actual not to exceed $127 per day

Reminder: Continental Breakfasts do not need to be deducted.

Meal Allowance Key:

Use the appropriate letter from the Meal Allowance Key to fill out the "Meals Allowed" and "Meals Provided" sections of the Travel Receipt form. (Must use capitol letters)

K = in-state/border city
O = out-of-state, regular
H = out-of-state, high-cost
S = out-of-state, special high-cost
I = International (not China)
C = China

Meal Allowance Reimbursement Tables:

Time of departure	Meals allowed
12:01 A.M.-6:00 A.M.	breakfast, lunch, and dinner
6:01 A.M. – 12:00 Noon	lunch and dinner
12:01 P.M.-6:00 P.M.	Dinner
6:01 P.M.-12:00 Midnight	no meals allowed

Time of return	Meals allowed
12:01 A.M.-6:00 A.M.	no meals allowed
6:01 A.M. – 12:00 Noon	breakfast
12:01 P.M.-6:00 P.M.	breakfast and lunch
6:01 P.M.-12:00 Midnight	breakfast, lunch, and dinner

IFAS PO Description Field

Examples

TRAVEL= *TOPEKA, KS-6/22/14* (*date is the travel leave date*)

REGISTRATION= *DOE, JOHN-REG-TOPEKA, KS* ((attach flyer that includes: When, Where, Lodging Rate, Meals provided, Registration amount)

MEMBERSHIP= *MEMBERSHIP-6/30/14-7/1/1*5 (if membership is in individuals name, must indicate on the receipt/invoice that membership will remain with FHSU)

SUBSCRIPTION= *SUBSCRIPTION-6/30/14-7/1/15*

OFFICIAL HOSPITALITY= *FY2013 STAFF TRAINING* (PO Print After Notes must include: Function, Host/Title, Date, Number Attending, Purpose)

If Traveler will not be reimbursed and no PO# is available, type Traveler's name instead of PO#.

P-CARD Description Field (limited to 25 characters abbreviate as necessary)

Examples

TRAVEL EXPENSE= *PO#-LODG-TOPEKA, KS*
PO#-AIRF-ORLANDO, FL

REGISTRATION= PO#-REG-MANHATTAN, KS (attach flyer that includes: When, Where, Lodging Rate, Meals provided, Registration amount)

RENTAL CAR FUEL= *RC FUEL-14.515G@$3.89/G*

MEMBERSHIP= *MEMBERSH06/30/13-07/01/14* (if membership is in individual name, must indicate on the receipt/invoice that membership will remain with FHSU)

SUBSCRIPTION= *SUBSCRIP6/30/13-7/1/14*

OFFICIAL HOSPITALITY= *FY2013 STAFF TRAINING* (also must complete Lotus Notes Hospitality form)

P-CARD Receipts

Tape small receipts to 8 ½ X 11 sheet of paper
Write on each receipt:
IFAS Bank ID (2 letter code on bottom left corner)
Travel PO # (if expense is related to travel) If Traveler will not be reimbursed and no PO# is available, type Traveler's name and trip destination instead of PO#