



Personal Expense Reimbursement Claim

INSTRUCTIONS: Be sure to read the back of this form for additional Instructions and Guidelines. Print clearly or type. Complete the appropriate sections of the Claim Form. **ORIGINAL RECEIPTS AND PROOF OF PAYMENT ARE REQUIRED.** Be sure to staple **original** receipts to the Claim Form. Sign and date the form. Submit the form, together with **original** receipts, to your Agency Representative for approval. The Agency Representative shall forward the Reimbursement Claim Form with pre-approved copy of Backfill/Overtime Request (if backfill is appropriate) to Participating Agency, Finance Manager for processing. Reimbursements are made by the Participating Agency.

Name _____ Task Force Position _____

Phone _____ Email _____

Home Agency _____ S.S.# /Vendor # _____

CA TF-4 TRAVEL/CONFERENCE EXPENSES						
REASON FOR TRAVEL:						
Date(s):						Totals
Lodging *						\$
Meals **						\$
Parking/Tolls/Taxi						\$
Airfare/Vehicle Mileage***						\$
Registration Fees						\$
Other (explain)						\$
Total Claim Amount						\$

* Lodging: ____ nights @ \$ ____ /night

** Meals: Per diem based on current GSA rates for date and region

*** Mileage: Mileage rates based on current IRS mileage rate

CA TF-4 BUSINESS/OTHER EXPENSES		
List Specific Expense Item(s)	Date	Totals
1.		\$
2.		\$
Total Claim Amount		\$

I certify that I have incurred the expenses detailed herein; that said details are true and correct; and receipts are attached.

Claimant's Signature: _____ Date: _____ Grand Total Claim Amt: _____

Participating Agency Finance Manager's Signature: _____ Date: _____

For CA TF-4 Program Office use only:		APPROVED FOR PAYMENT			
CA TF-4 Manager's Name: _____		Signature: _____		Date: _____	
Charge to:	Administration	Training	Cache	Facilities	Transportation
		(Circle one)			

IMPORTANT
EXPENSE CLAIM GUIDELINES AND INSTRUCTIONS

GENERAL:

- ***Eligibility:*** CA TF-4 members* are eligible to receive reimbursement for out of pocket personal expenses that were incurred while on official Task Force business in accordance with applicable CA TF-4 and DHS/FEMA policies and procedures.
- ***Receipts:*** Receipts are mandatory and copies must be attached to Claim Form. This includes a copy of a credit card receipt if payment was made by charge card.
- ***Questions:*** If you have doubts as to whether an expenditure is reimbursable by the Task Force, check the appropriate policies and procedures and follow the chain of command structure **prior** to incurring the expense.

CA TF-4 TRAVEL/CONFERENCE EXPENSES:

- ***Alcoholic Beverages:*** There is NO reimbursement for wine, beer or other alcoholic beverage.
- ***Airline Tickets and Car Rental:*** DHS/FEMA and CalEMA will often book and/or designate transportation for meetings and training. CA TF-4 Members are NOT authorized to make travel arrangements on his/her own without **PRIOR** authorization by the CA TF-4 Office.
- ***Meals:*** Need to indicate the type of meal (breakfast/lunch/dinner). Per diem for meals is based on current GSA rates and location. Please reference GSA for information and submit supporting documentation. Meals taken in lieu of meals provided as part of a sponsored event or hotel stay are not reimbursable.
- ***Registration Fees:*** Forms and agendas which give details of costs, dates and program activities must accompany claim for reimbursement at all meetings, seminars, conferences, conventions, or classes.
- ***Lodging:*** A copy of the hotel statement and proof of payment is required **reflecting a "0" balance**. Upgrades from the standard room rate are at your own expense.
- ***Mileage:*** In accordance with CA TF-4 policy, if the trip involved the first or last point of business contact of the workday, the calculation is to take your gross trip miles and deduct your regular commute miles. If the gross mileage is greater than the regular commute mileage the difference is your net allowable miles. You are eligible for reimbursement only for your Net Mileage. Enter your net mileage calculation in the appropriate box.

CA TF-4 BUSINESS/OTHER EXPENSES:

- ***Description:*** Need to clearly state what was the item(s) purchased (include CA TF-4 Purchase Requisition #) or reason for expenditure.
- ***Prior Approval:*** Any purchase over \$100 requires a pre-approved CA TF-4 Purchase Requisition.

*CA TF-4 members that have *Individual Participating Agreements* are also required to be approved as a *Vendor* with the City of Oakland Fire Department. Reimbursement request are to be submitted directly to the CA TF-4 Office.