



Research Foundation of
The City University of New York
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**EPAYMENT TRAVEL EXPENSE
VOUCHER AND REQUEST
FOR PAYMENT**

FOR EPAYMENT USE ONLY

TRAVELER'S
NAME (print) _____

MAILING ADDRESS _____

CITY _____

STATE _____ ZIP _____

BOX MUST BE CHECKED

US CITIZEN / PERMANENT RESIDENT YES NO
Permanent Resident means the person is a green card holder

PRUPOSE OF TRIP _____

ITINERARY

| Date | | | | | | | |
|----------------------|--|--|--|--|--|--|--|
| Departure: City | | | | | | | |
| Time | | | | | | | |
| Destination: City | | | | | | | |
| Time | | | | | | | |

EXPENSES

| | | | | | | | |
|----------------------------|--|--|--|--|--|--|--|
| Transportation | | | | | | | |
| Lodging | | | | | | | |
| Meals | | | | | | | |
| Local Travel | | | | | | | |
| Auto-No. of Miles Traveled | | | | | | | |
| (\$ 0.00 per mile) | | | | | | | |
| Other: | | | | | | | |
| | | | | | | | |

| | | |
|---|------------------|------|
| Traveler certifies that this request is accurate and correct and that traveler endeavored to obtain best pricing for transportation and lodging expenses. | Total Expenses | |
| | Less Advances | |
| | Net Amount Due | |
| Signature of Claimant | Project Position | Date |

FORM RF-041 (11/11) – EPAY

This form can only be used with the Epayment Request System when creating an Epayment Travel Expense Voucher and Request for Payment via the website www.rfcuny.org under E-Services menu.

INSTRUCTIONS

For Epayment Travel Expense Request

Refer to Travel sections of RF's on-line Project Director's Guide for Details of Policy and Procedure

Reimbursement for expenses incurred during properly authorized business travel should be claimed within five days after completion of trip.

1. Complete form in full and secure necessary approval signature.
 - (a) Enter itinerary and expense data for each day of travel. Itinerary data should indicate time of departure or arrival of common carrier except as otherwise provided in governing N.Y. State guidelines.
 - (b) Verify that the amounts claimed for meals and lodging are within the allowable per diem rates. For overnight travel 75% of the published per diem rate for meals is allowed for the first and last day of travel.
 - (c) Cash advances (if appropriate) should be on the "Less Advances" line and deducted from total expenses to show net amount claimed by traveler.

Please attach copies of the documents below to the [Epayment Request for Travel Reimbursements](#)

2. Attach copies of the original receipts for expenses, such as airline or train tickets, boarding passes, toll charges, car rental, limousine service, meeting registration, etc. Written justification must be provided for car rental. Receipts are not required for personal meals. For business meals, a detailed restaurant receipt and proof of payment are required, along with a list of attendees and statement of business purpose for the expenditure.
3. Attach copies of the conference brochure, seminar agenda, or other documentation to characterize the purpose of travel.
4. Attach copies of the hotel bill or other evidence of duration of trip.
5. Attach copy of Travel Advance Request RF-040 or Advance Request RF-040-EPAY if Travel Advance was obtained and submit the Epayment Request to the RF. Please note that the Epayment Request system cannot be used if the amount of the advance exceeds the total of travel expenses, instead please make a check payable to Research Foundation of CUNY for the amount owed and attach to the RF Travel Expense Voucher Paper Document.
6. Send completed form, with attachments to the Research Foundation OTPS Team.
7. A check for the net amount due the traveler will be issued after receipt of properly completed Travel Expense Voucher and Request for Payment and all required supporting documentation.
8. Consult Project Director's Guide for current mileage reimbursement rate.
9. Approval by Project Director or designee attests that travel was necessary for accomplishment of project. Where travel is restricted in the grant or contract, approval certifies that this trip was in conformance with such restrictions.