

# University ProCard & Travel

---

*Presented by:*  
Controller's Office



**CENTRAL**  
**STATE UNIVERSITY**



# Agenda

---





- 🏛️ Welcome
- 🏛️ Policy Overview
- 🏛️ The Travel Procard
- 🏛️ Request For Travel (RFT)
- 🏛️ Travel Expense Report (TER)
- 🏛️ Settle-up Process (Audit)
- 🏛️ Bank of America “Works” Application
- 🏛️ The Business Procard

# Policy Overview



**CENTRAL**  
**STATE UNIVERSITY**






The University Travel Policy can be located on the University Website under [CSU Policies and Procedures](#). The sections pertaining to university travel and Travel ProCard and Business ProCard are as follows:

-  [Policy No. 410- Travel Rules, Regulations and Guidelines](#)
-  [Policy No. 410.1- Travel Procedures](#)
-  [Policy No. 511- University Procurement Card](#)
-  [Policy No. 511.1 Procurement Card Procedures- Procurement Card Procedures](#)

# The ProCard

---

The Procard was established by the Office of the Vice President and Chief Financial Officer (CFO) to execute procurement requests for University business related to travel such as:

-  Conference Registration
-  Hotel
-  Meals
-  Transportation (i.e. car rental and airfare)
-  Fuel



**CENTRAL**  
**STATE UNIVERSITY**

# Allowable Expenses



Allowable Travel Expenses	Procard Eligible with itemized receipts	Reimbursable with itemized receipts
Lodging	Y	Y
Airfare	Y	Y
Airline Baggage	N1	Y
<b>Ground Transportation</b>		
Mileage	N	Y
Fuel	N1	Y
Taxi	N1	>\$5
Rental Cars	Y	Y
Shuttle Service	N1	Y
Toll	N	>\$5
Meals	Y	>\$25 per day
<b>Parking</b>		
Airport Parking	N1	>\$5
Public Garages	N1	>\$5
Conference Registration	Y	Y
<b>Sundries</b>		
Laundry	N	Y
Internet for business purpose	N	Y
Gratuities	N	Y

## Quick Reference Chart

*Y* – allowable by Policy 410/Policy 511

*N* – not allowable by Policy 410/Policy 511

**N1** – Controller will allow with proper documentation



**CENTRAL  
STATE UNIVERSITY**

# Prior Approval

---

All travel on behalf of the University must be properly approved fourteen (14) days prior to the date of travel. The cardholder is required to submit the following for travel approval and purchase order:

- Request for Travel Form (RFT) which includes dates of travel
- Conference/Meeting Information (i.e. registration packet, agenda, etc.)
- Travel Pricing/Quotes (i.e. airfare, hotel, car rental)
- Budget availability



**CENTRAL**  
**STATE UNIVERSITY**

# Request for Travel Form (RFT)

Central State University Authorized Approval  
 Employees with/without students  
**PART A – Request for Travel – RFT**

*The RFT is to be completed with all authorized signatures at least 14 days before intended travel.*

a. Requestor: \_\_\_\_\_ Date(s) of Intended travel: \_\_\_\_\_

b. Department and/or Unit: \_\_\_\_\_ Date of Departure: \_\_\_\_\_ Return: \_\_\_\_\_

c. Final Destination of this travel: \_\_\_\_\_

d. Primary purpose for travel: \_\_\_\_\_

e. Are there any interval destinations?  Yes  No  
 If YES, please list each destination, length of time and purpose: \_\_\_\_\_

Is the Requestor the only party traveling?  Yes  No  
 If NO, please list others who are part of the travel:  
 Staff \_\_\_\_\_ Faculty \_\_\_\_\_ Students \_\_\_\_\_ Others \_\_\_\_\_  
 If others, please explain: \_\_\_\_\_

Does this specific travel require lodging?  Yes  No

Does the travel require contact with a state, regional or national political office or official?  Yes  No  
 If YES, please list name(s): \_\_\_\_\_

**ACCOUNTING DATA**

Line Fund	ORGN	Sub-ORGN	Account Code	TOTAL
_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	\$ _____

EXPENSE:	ESTIMATED COST:
MEALS (\$40 per day for faculty & staff; \$20 per day for students)	_____
GROUND TRANSPORTATION (\$.55 per mile)	_____
AIR TRAVEL	_____
PARKING	_____
CAR RENTAL	_____
REGISTRATION COST IF APPLICABLE	_____
HOTEL	_____
	<b>ESTIMATED TOTAL: \$ _____</b>

**APPROVAL SIGNATURES REQUIRED. ELECTRONIC SIGNATURES ARE NOT PERMITTED.**

\_\_\_\_\_  
 Signature of Requestor Date

\_\_\_\_\_  
 Dean, Unit Head or Immediate Supervisor Date

\_\_\_\_\_  
 Authorizing Vice President Date

*If University Fleet Services are desired, please complete PART B of this form.  
 Once completed, print and submit to the Fleet Manager/Supervisor. Electronic signatures are not permitted.*



**CENTRAL  
 STATE UNIVERSITY**

# Tax Exemption Form



**CENTRAL**  
**STATE UNIVERSITY**

Central State University's purchases are exempt from Ohio sales tax. The university has a Blanket Certificate of Exemption Form on file with many Dayton area businesses.

Filing the form with a vendor is necessary in order to receive tax exemption. A Blanket Certificate of Exemption Form should be presented to the vendor. Exemption exceptions:

- **Bed taxes, occupancy taxes, excise taxes, etc.** charged by in-state and out-of-state lodging business as well as out-of-state sales taxes. These **will be reimbursed**.

If an invoice/receipt is received and includes sales tax the following steps need to be taken:

1. Contact the vendor immediately and inform them of CSU's tax exempt status
2. Ask the vendor to reissue a new invoice/receipt without tax and refund the taxes

**\*University departments may obtain copies of the Tax Exempt Form from the Controller's Office**



# Tax Exemption Form



Ohio | Department of Taxation | STEC B Rev. 3/15  
tax.ohio.gov

### Sales and Use Tax Blanket Exemption Certificate

The purchaser hereby claims exception or exemption on all purchases of tangible personal property and selected services made under this certificate from:

\_\_\_\_\_  
(Vendor's name)

and certifies that the claim is based upon the purchaser's proposed use of the items or services, the activity of the purchase, or both, as shown hereon:

Central State University - Vendor Number OH45227: Support of university's educational activities.

\_\_\_\_\_  
*Purchaser must state a valid reason for claiming exception or exemption.*

Central State University  
Purchaser's name  
State Institution of Higher Learning University  
Purchaser's type of business  
1400 Brush Row Road, PO Box 1004  
Street address  
Wilberforce, Ohio 45384  
City, state, ZIP code

\_\_\_\_\_  
Signature  
\_\_\_\_\_  
Date signed  
OH45227  
Vendor's license number, if any

\_\_\_\_\_  
Controller  
Title

Vendors of motor vehicles, titled watercraft and titled outboard motors may use this certificate to purchase these items under the "resale" exception. Otherwise, purchaser must comply with either rule 5703-9-10 or 5703-9-25 of the Administrative Code. This certificate cannot be used by construction contractors to purchase material for incorporation into real property under an exempt construction contract. Construction contractors must comply with rule 5703-9-14 of the Administrative Code.



CENTRAL  
STATE UNIVERSITY

# Travel Settle-Up

---

- Incomplete Travel Expense Reports will be returned to the traveler for completeness



CENTRAL  
STATE UNIVERSITY



Travel Expense Reports are due in the Controller's Office no later than the **10<sup>th</sup>** of the month following the month of travel.

# Reconciliation Checklist

---



**CENTRAL  
STATE UNIVERSITY**

Monthly Reconciliation MUST include **all** of the following items:

- 🏛️ Approved and completed Travel Expense Report (TER)
- 🏛️ Procard Statement
- 🏛️ Approved and completed Request for Travel Form (RFT)
- 🏛️ Conference Agenda/Schedule and travel itinerary
- 🏛️ Original Receipts for all expenses on the monthly statement which includes;
  - Vendor name, date of transaction and description of purchase
  - Original itemized receipts for meals over \$25

***Note: Please number all transactions on statement to corresponding receipt***

- 🏛️ Additional documentation as required based on incurred expenses
- 🏛️ Purchase Order to cover **all** expenses and reimbursements
- 🏛️ Receipt for reimbursement to the University for any unauthorized or improperly documented travel, or travel that exceeds the approved amounts
- 🏛️ Travel Expense Reports must include **all** receipts and supporting documentation.

# Travel Expense Report (TER)



**CENTRAL  
STATE UNIVERSITY**

## CENTRAL STATE UNIVERSITY Travel Expense Report TRAVEL EXPENSE DETAILS

<b>Procard Holder Name:</b>	Organization Title:	Organization Fund No:
Travelers Name:	Destination:	
<b>Procard Statement Date:</b>	Dates of Travel:	
Purpose of Travel:	Amount Authorized:	

### **NEW** Required Fields:

- **Procard Holder Name-** Whose Procard was used
- **Procard Statement Date-** What statement month do the expenses reconcile with



# Travel Expense Report (TER)



CENTRAL  
STATE UNIVERSITY

DATES:								
DESCRIPTION	Totals	Day #1	Day #2	Day #3	Day #4	Day #5	Day #6	Day #7
Lodging daily rate	0							
Room tax	0							
Occupancy tax	0							
Other	0							
<b>Total Lodging</b>	0	0	0	0	0	0	0	0

Required Fields:

-  **Date**- Enter each day of travel the TER represents
-  **Lodging**- If expenses are incurred for lodging complete rate and taxes for each day as indicated above. Lodging is only reimbursable when associated with a round trip travel that is greater than 130 miles

***Note: No Rewards points are to be received for state purchased lodging***

# Travel Expense Report (TER)

POV Miles driven	\$ 0.00					
Total POV (x .58/mile)	0	\$ 0.00				
Total Airfare	0					
Seating Cost	0					
Baggage	0					



CENTRAL  
STATE UNIVERSITY

**NEW** Required Fields:

- **Mileage**- To cover incremental costs above and beyond the employee’s normal work commute. More than one location during a trip requires a completed POV form. Must include mileage calculator documentation for reimbursement **Note: IRS mileage rate changes yearly**
- **Airfare**- Reimbursed only at the **COACH** rate  
**Note: No Frequent Flyer miles are to be received for state purchased airfare**
- **Seating Cost**- Seating cost allowable if **REQUIRED** to pick a seat. Upgrades are not reimbursable.
- **Baggage**- Must be reasonable. Justification required for anything over the normal rate

# Travel Expense Report (TER)

Ground Transportation Type	0							
<i>Rental Rate</i>	0							
<b>GAS</b>	0							
<b>Taxi, Uber, Lyft</b>	0							
<b>Total Ground Transportation</b>	0							

## Required Fields:

### Ground Transportation Cost

 **Rental Car**- Economy Class. Luxury car rentals are not reimbursable

**Note: No Rewards points are to be received for state purchased rentals**

 **Taxi/Uber/Lyft**- Must be evidenced by a receipt

 **Gas**- Cost associated with the rental car or fleet vehicle. Cannot get reimbursed for gas **and** taxis, ferries or rideshare



**CENTRAL  
STATE UNIVERSITY**

# Travel Expense Report (TER)



CENTRAL  
STATE UNIVERSITY

Total Meals	Breakfast	\$ 0.00						
	Lunch							
	Dinner							
	Other							
Meals subtotal per day			0	0	0	0	0	0
Adjustments			0					
Subtotal after adjustment			0	0	0	0	0	0

## Required Fields:

**Meals-** reimbursed based upon actual expense and are expected to be reasonable and prudent

- Maximum amount is **\$40.00/day** for faculty, staff and students.  
*Exception: High Cost City, Must include documentation*
- Original **itemized** receipts are required for meals exceeding \$25.00
- Distance traveled must exceed 200 miles round trip or an overnight stay is approved
- Meal gratuity count in daily meal allowance and are not to exceed 20%





**CENTRAL  
STATE UNIVERSITY**

# Travel Expense Report (TER)

Conference Registration	0								
Parking	0								
Tolls	0								
Tips	0								
Other:	0								

## Required Fields:

- Conference Registration**
- Parking-** Must be reasonable and prudent and evidenced by a receipt
- Tolls-** Must be paid at the time it is incurred and evidenced by a receipt
- Tips-** Tips for porter and housekeeping maximum of \$5.00/day for overnight travelers on the first and last day and \$2.00/day during the trip. Tips associated with taxis and fares not to exceed 20% of the fare

***Note:** Traffic fines, towing and like expense are not allowable. If not paid by the traveler when incurred will cause action by the Controller's Office resulting in suspension of Procard and/or deduction from pay*

# Travel Expense Report (TER)



**CENTRAL STATE UNIVERSITY**

Total Expenses:	0								
Amount Prepaid by CSU:	0								
Amount authorized:	0								
Amount Authorized:	0	.							
Total Expenses:	0								
Prepaid by CSU:	0								
POs - issued for Procard									
**Amount due traveler:	0								
Pos- issued for reimbursement									

\*\*If monies due to traveler, traveler must complete a Request for Reimbursement Form and attach to TER for payment.

**NEW** Required Field:

- Request For Reimbursement Form-** Out-of-Pocket expenses incurred and requesting reimbursement need to be identified and entered on a new reimbursement form with original receipts attached

# Reimbursement Form



## Request for Reimbursement Form

The purpose of this form is to request reimbursement for out-of-pocket business expenses I incurred on behalf of the University for the following  Travel  Non-travel

NAME \_\_\_\_\_ POSITION \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_

DEPARTMENT \_\_\_\_\_ CONTACT PHONE# \_\_\_\_\_

PURPOSE OF EXPENSE \_\_\_\_\_

PURCHASE ORDER NUMBER \_\_\_\_\_

### FORM OF PAYMENT:

Cash  Check  Provide all original receipts

Credit  Provide all original receipts or a copy of your itemized credit card statement

**\*Note: Sales tax cannot be reimbursed due to the tax exempt status of Central State University. Prior to your purchase contact the Controller if you need a copy of the Tax Exempt Form.**

Description	Fund	Org	Acct	Prog	Total

TOTAL REIMBURSEMENT REQUESTED: \_\_\_\_\_

Preparer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by Authorized Manager/Director: \_\_\_\_\_ Date: \_\_\_\_\_

Submit Requests to: Candy H. Carr, Controller | 1400 Brush Row Road | P.O. Box 1004 | Wilberforce, OH 45432 | 937-376-6686 | ccarr@centralstate.edu



**CENTRAL  
STATE UNIVERSITY**

# Request For Reimbursement (RFR)



**CENTRAL**  
**STATE UNIVERSITY**

---

**Request For Reimbursement Form-** is for out-of-pocket expenses incurred for travel and non-travel expenditures. If an employee is entitled to travel reimbursement, no reimbursement will be made beyond the dates on the RFT.

**TER Track**  
**Travel Expense**  
**Report**



There are two (2) tracks

**RFR Track**  
**Request for**  
**Reimbursement**

# TIPS for Completing Travel Reports

---

- Do not include expenses already reported in a prior month
- Always make sure your Request for Travel Form (RFT) is included **AND** covers all expenses on your monthly statement
- Meal per diem is calculated daily and not by total days traveled. (Quick Access for Per Diem Rates <https://www.gsa.gov/travel/plan-book/per-diem-rates> )
- Always take an envelope to store all receipts together when traveling
- Report reimbursements separately from Procard expenses to expedite the reimbursement process



CENTRAL  
STATE UNIVERSITY

# Bank of America “Works”

---

## A Notice From the Bank of America Merrill Lynch Works Application

TO: Cardholder

To set your password, begin by entering your username or email address at this URL:

Your username: Cardholder Username  
Your email address: Cardholder email address provided by CSU

For further assistance, please contact one of your program administrators:

TRASENNA GRAY  
JUN ZUO

TGRAY@CENTRALSTATE.EDU  
JZUO@CENTRALSTATE.EDU



**CENTRAL  
STATE UNIVERSITY**

<https://payment2.works.com/works/password?viewType=validateInitial&pwdCode=2156104931-260f23414a16a11219409ca961855e440d5894a95d6a57ae421ce62f4f5befcc>

Business  
ProCard

---



CENTRAL  
STATE UNIVERSITY

# Business ProCard

---

- The Business ProCard was established in 2018 to provide the campus community with a way to pay for small dollar amounts in an emergency.
- All transactions using the Business ProCard shall be in accordance and compliance with all applicable University purchasing and procurement guidelines, policies and procedures.
- Failure to submit reconciliation and receipts in a timely manner will result in deactivation of the ProCard.
- Misuse or unauthorized use of the ProCard shall result in immediate disciplinary action, up to and including termination of employment.



CENTRAL  
STATE UNIVERSITY



# Business ProCard

---

## Cardholder Responsibilities:

- Request line item budget of \$2,500.00 for miscellaneous expenses
- Establish an open Purchase Order each fiscal year to Bank of America
- The cardholder shall submit monthly by the **10<sup>th</sup>** of each month to the ProCard Administrator :
  - Copy of the monthly statement
  - The monthly transaction log
  - Receipts associated with the monthly statement



**CENTRAL  
STATE UNIVERSITY**

# Business ProCard Transaction Log



**CENTRAL  
STATE UNIVERSITY**

CENTRAL STATE UNIVERSITY Business ProCard Transaction Log								
Cardholder Name:			Department:			Month:		
	Transaction Date	Posted Date	Purchase Order #	Expense Allocation		Merchant	Amount	Description of Item Purchased
				Fund Number	Account #			
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								
							\$	
Submitted by:			Cardholder					
Approved by:			Supervisor					

# Business ProCard

---



**CENTRAL**  
**STATE UNIVERSITY**

## UNALLOWABLE USES OF UNIVERSITY BUSINESS CARD

University Pro Cards may **not** be used to purchase these goods and services:

- ❑ Hazardous Materials
- ❑ Chemicals
- ❑ Capital Equipment/Furniture
- ❑ Computers
- ❑ Independent Contractors
- ❑ Entertainers
- ❑ Temporary Employment
- ❑ Personal Purchases
- ❑ Purchases from suppliers participating in the Marketplace or from contract suppliers
- ❑ Gifts, Prizes, Alcohol and/or Flowers;
- ❑ Cash Advances
- ❑ Clothing Apparel
- ❑ Software
- ❑ Amazon purchases

**Note:** *No purchases with the University Procard should be sent to cardholder's home*