

**CFA TRAVEL EXPENSES GUIDELINES
FOR
BOARD, ASSEMBLY & COMMITTEE/MEMBERS**

(All charges \$5 and over require receipts; vouchers must be submitted complete with receipts within 30 days of the week of incurrence in order to be reimbursed.)

A. Travel Allowance

1. **COMMON CARRIER AIR TRAVEL** - allowance will be based on the coach fare from the nearest convenient airport to the authorized person's residence plus the least expensive convenient transportation to the airport from the person's residence. Other common carrier allowance will be based on standard coach fare.
2. **PERSONAL CAR** - authorized use is reimbursed at 50 cents per mile except such travel shall not exceed common carrier rate unless that common carrier is unreasonable inconvenient.
3. **PARKING** - actual expense with receipt.
4. **AIRPORT SHUTTLE FARE** - actual expense.
5. **TAXICABS** - normally not reimbursable except when no other transportation is practical or available or unless the taxi fare for several riders is less than the common carrier fare. Receipts required.
6. **CAR RENTAL** - in cases where the use of common carrier is not feasible car rental may be reimbursed. However, the justification for the rental car usage, as well as the receipt must accompany the claims.

B. Lodging

1. **ASSEMBLY** - delegates will be reimbursed at the negotiated double occupancy rate. Individuals requiring single accommodations must pay the additional expense.
2. **BOARD/COMMITTEE** - lodging expenses will be reimbursed at the negotiated single occupancy rate.
3. Receipts must accompany all lodging expense claims.

C. Meals

1. Meal expenses will be reimbursed to a maximum of \$44 per day. Individual meal limitations are \$25 per meal. Breakfast shall not be claimed if departure is after or return is before 8 a.m., Lunch shall not be claimed if departure is after or return is before 12 noon. Dinner shall not be claimed if departure is after or return is before 6 p.m.

D. Other Expenses

1. Telephone or fax - reimbursable if related to CFA business. The actual expense is reimbursed when date, place and party called are shown on the claim; amounts in excess of \$2.50 (receipts required).
2. Board - Incidental expenses \$2 per day allowed.

E. Certification of Liability Insurance Requirements & Condition of Vehicle

I certify that I have liability insurance in force in at least the following amounts: \$100,000 for personal injury to, or death of, one person, \$300,000 for personal injury to two or more persons in one accident, \$5,000 for property damage. I further certify that my vehicle is adequate for the work performed, equipped with seat belts and in safe mechanical condition.

Claimant's signature: _____

ATTACH RECEIPTS TO VOUCHER AND MAIL TO:

*Business Office
California Faculty Association
5933 W. Century Blvd., Suite 220
Los Angeles, CA 90045*

Rev. 12/09

DATE 8 7 ITEM	/ / MONDAY	/ / TUESDAY	/ / WEDNESDAY	/ / THURSDAY	/ / FRIDAY	/ / SATURDAY	/ / SUNDAY	TOTAL
BRKFAST								
LUNCH								
DINNER								
LODGING								
TAXI/BUS								
AIR/RAIL								
MILEAGE								
PARKING								
OTHER **								
**								
**								
TOTAL								

PURPOSE OF MEETING OR EVENT:

PLACE OF MEETING:

DATE(S):

**EXPLANATION (Must have adequate explanation for "OTHER" items)

I CERTIFY THAT THE ABOVE STATEMENTS ARE CORRECT.

SIGNATURE

DATE

NAME (PLS. PRINT)

STREET

CITY

STATE

ZIP

**PLEASE ATTACH
APPROPRIATE
RECEIPTS**

For Office Use Only

ATTACH RECEIPTS AND MAIL TO:

**Business Office
California Faculty Association
5933 W. Century Blvd., Suite 220
Los Angeles, CA 90045**

Please call the Business Office at 310/641-4430 if you have any questions regarding your expense claim.

_____ APPROVAL	
_____ BUDGET CODE	_____ AMOUNT

