

Completing a TR1 for Travel Reimbursement

At TR1 form is the form designated by the State of Arkansas and Arkansas Tech University to be completed and submitted to Travel Services along with all appropriate documentation to request reimbursement for expenses incurred as a result of official university travel. **Charges placed on the ATU Travel Card will not appear on your TR1.**

1. Access the [TR1 form](#) located on the Travel Services website.
2. Key purchase order number(s) that have been issued for your trip.
3. Select the checkbox if you would like to pick up your check in the Disbursing Office.
4. Key the **Department Name, Index, Name of Payee, Home Address of Payee, Official Station associated with Payee. These are required fields.**
5. Personal Vehicle License Number, required if you are requesting reimbursement for personal mileage.
6. Enter a separate row of information for each town visited, even if you visit two different towns in the same day. Also enter any airfare, lodging, meal, incidental or mileage expense that you have for that day. Please see the [Meal and Lodging Per Diem Chart](#) for meal reimbursement allowances. Select Landscape Orientation when printing the completed TR1.

Arkansas Tech University TRAVEL EXPENSE REIMBURSEMENT FORM, TR-1E													
PO Number(s) <u>P012345</u>										<input type="checkbox"/> Check here if you would like to pickup your check in the Disbursing Office located in Browning Hall.			
DEPARTMENT: <u>Procurement Services</u>					Index: <u>AFPURC</u>			OFFICIAL STATION (Rsvl, OZ, ATCC, etc.) <u>RSVL</u>					
Name of Payee: <u>Jane Smith</u>										Private Vehicle License Number (Only necessary if claiming mileage reimbursement): <u>123 ABC</u>			
Home Address: <u>123 Jerry Drive</u>													
DETAILED EXPENDITURES OTHER THAN MILEAGE									Personal Vehicle Mileage Reimbursement				
DATE	NAME OF TOWN VISITED	Common Carrier (airline, train, etc)	Lodging	Meals	Meal Designation (B,L,D)	Incidentals	Incidental Code (see below)	Total Per Day	FROM	TO	MILEAGE DRIVEN	RATE PER	AMOUNT CLAIMED
1/15/17	Little Rock, AR			10.25	L			10.25	Russellville, AR	Little Rock, AR	82	0.42	34.44
1/15/17	Phoenix, AZ		169.25	20.75	D			190.00				0.42	0.00
1/16/17	Phoenix, AZ		169.25	44.32	L, D			213.57				0.42	0.00
1-17-17	Phoenix, AZ			11.00	B			11.00				0.42	0.00
1-17-17	Little Rock, AR			12.50	L	52.00	2	64.50	Little Rock, AR	Russellville, AR	82	0.42	34.44
								0.00				0.42	0.00
								0.00				0.42	0.00
								0.00				0.42	0.00
								0.00				0.42	0.00
								0.00				0.42	0.00
								0.00				0.42	0.00
								0.00				0.42	0.00
								0.00				0.42	0.00
								0.00				0.42	0.00
SUB-TOTALS		0.00	338.50	98.82		52.00		489.32	TOTALS FOR MILEAGE			0.42	
If Incidental Code 6 is used, explain here :												.42	68.88
Lodging Provided Statement-To be completed if lodging is provided at no cost to the University					For travel performed as indicated on this travel reimbursement form, the payment of actual lodging expense is authorized because lodging within the Federal Travel Directory rates was unavailable or unfeasible for the area in which the travel occurred. I certify that the travel was completed as indicated on this travel reimbursement form and if the travel reimbursement is for a volunteer, a non-state employee, and/or official guest(s), to my knowledge, that person will not be reimbursed these same travel expenses from any other source.					Incidental Codes			
I certify that the person listed below provided lodging to me at no cost while I traveled on University business.										1. Taxi 2. Parking Fee 3. Registration Fee 4. Emergency Car Repairs 5. Meals for State Guests 6. Other (Explain Above)			
Name: _____ Address: _____													
City, State, Zip: _____ Telephone: _____													
Signature of Traveler: _____													
Signature of Supervisor: _____													
Title of Supervisor: _____													
										SUB-TOTAL		489.32	
										MILEAGE CLAIMED		68.88	
										Total Claimed \$ 558.20			