

4.2 REIMBURSEMENT TRAVEL POLICY

Policy #: 4.2

Original Policy Number: 200-4

Original Policy Created: 9-98

Date Reviewed: 1-06, 6-10, 3-14, 6-17, 9-18, 3-21, 8-21

Approved: 4-06, 7-10, 4-14, 6-17, 9-18, 3-21, 8-21

PURPOSE

The purpose of the policy is to establish policies and procedures for all travel by people seeking reimbursement from the Association.

PERSONS AND AREAS AFFECTED

The Board of Directors, IAFN members, non-IAFN members (who have been approved for reimbursement of expenses while performing IAFN business), recipients of IAFN-awarded grant funds and staff.

POLICY

IAFN reimburses all individuals for necessary and reasonable travel and expenses related to IAFN approved business. All individuals performing work on behalf of IAFN must adhere to IAFN's budgetary parameters for travel expenses to qualify for full reimbursement. Unless otherwise authorized by the Chief Executive Officer or Chief Operations Officer due to extenuating circumstances, no expenses over and above the approved travel budget will be reimbursed. For specific information on budgeted travel expenses, contact accounting@forensicnurses.org.

PROCEDURE

- Complete the IAFN reimbursement expense form and submit to IAFN home office no later than 30 days from completion of travel. It is the responsibility of each individual to maintain their own travel records. Expenses submitted after 30 days may not be reimbursed.
- Copies of expense account receipts are required for lodging, air travel, ground travel (if commercial), baggage fees and parking. Please obtain a copy of lodging receipt even if it was prepaid by IAFN.
- Employees shall submit expense reimbursements once a month to their immediate supervisor for approval and the supervisor will forward to the finance department for processing.
- Reimbursements are processed and issued through IAFN's electronic bill payment system for all non-employees and paid either via Automated Clearing House (ACH) deposit

(recommended) or mailed to the individual's home address. Employee expense reports are reimbursed on the payroll following submission to the finance department.

A. REIMBURSEBLE EXPENSES

Transportation:

Ground or air transportation will be reimbursed at the lowest rate.

Mileage will not be reimbursed above the lowest airfare rate without prior approval from the CEO or COO.

Air travel, arrangements must be made at least 21 days in advance of start of travel but not more than 45 days in advance of travel, unless approved by the CEO (individual will be charged any costs over the 21-day rate).

Airfare made less than 21 days in advance will result in a 75% reimbursement of the amount paid.

Receipts are required.

All individuals seeking mileage reimbursement must complete and submit a travel reimbursement approval form to CEO for signature at least 30 days prior to travel. (See Appendix 1)

With few exceptions, the individual is responsible for making their own transportation arrangements.

Air transportation is defined as round-trip economy coach. Up to one baggage fee each way may be included. For extended travel, prior approval from CEO for reimbursement for additional bags is required. For medical exceptions substantiated by proper backup documentation (doctor's statement on the practice letterhead), travelers can request that upgradeable tickets be purchased at incremental additional cost to the lowest airfare available.

Automobile mileage reimbursement provided when mileage exceeds 25 miles or more and is at the prevailing US General Services Administration rate per mile (in effect on the date the expense was incurred), tolls, and parking. This information may be obtained at www.gsa.gov. When privately owned automobiles are authorized or approved for transportation, distances between points traveled shall be as shown in standard highway mileage guides or actual miles driven as determined from odometer readings. Employees are not paid mileage to travel to the office except in special circumstances that have been pre-approved by the CEO.

Ground transportation is defined as a round trip to the airport, hotel, and home using the most cost-effective method of transportation (i.e., shuttle service). Parking associated with travel may also be reimbursed with receipts.

Lodging: The full single room rate for each day required at functions or other approved events (room and tax only) will be reimbursed. Receipts are required.

Meals & Incidentals (ME&I): Rates will be followed according to the current US

General Services Administration (in effect on the date the expense was incurred). These rates may change annually and may be found at www.gsa.gov for the most current information. ME&I on travel days is paid at 75% of the daily GSA rate for all Board, staff, volunteer and/consultant travel where reimbursed travel is allowable. Consultants traveling by car to and from a site on a daily basis (e.g., a clinical skills lab training) will be paid ME&I at the 75% rate.

Receipts for meals are not required unless the authorized individual is submitting for less than the meal ME & I rate. These meal receipts must outline items as credit card slips will not be sufficient. If a meal is included in the price of the conference registration fee or otherwise provided, the ME & I rate must be reduced based upon the provided meal. Alcohol will not be included in any reimbursement.

Staff Internet: Full time staff will be reimbursed a flat rate of \$50 per pay period for internet.

Other Expenses (e.g. telephone, fax, copying, mailing fees): Receipts of detailed expenses (example: copies of telephone bills with highlighted line items, person called, nature of discussion) are required and shall be submitted with the general expense report to the IAFN home office. Prior approval of these expenses is necessary.

Annual conference*: Reimbursement related specifically to the Association’s annual conference will follow the outlined table below:

	No. of people	Air (coach)	Lodging (conference hotel only)	Ground transport	ME & I	Conference registration
IAFN Staff	Dependent on staffing need	Yes	Dependent on staffing need	Yes, from conference airport to hotel roundtrip	Yes, excluding meals provided during conference	Yes
IAFN Board	11	Yes	6 nights hotel	Yes	Yes, excluding meals provided during conference	Comp
CNFC Elected Positions	6	Yes	2 nights hotel	No	No	-
CFNC Chair	1	Yes	2 nights hotel	No	No	Comp
CFNC Appointed Position: Public Member	1	Yes	2 nights hotel	No	75% on travel days (2 days maximum) and annual meeting day	Comp

	No. of people	Air (coach)	Lodging (conference hotel only)	Ground transport	ME & I	Conference registration
					@ 100% minus meals provided	
CFNC Appointed Position: Employer Member	1	Yes	2 nights hotel	No	75% on travel days (2 days maximum) and annual meeting day @ 100% minus meals provided	No
JFN Editorial Board	5	Yes	2 nights hotel	No	No	No
JFN Editor and Associate Editor	3	Yes	2 nights hotel	No	No	Comp
Planning Committee	8	No	No	No	No	Comp
Planning Chair	1	Yes	5 nights hotel	No	No	Comp
Virginia Lynch	1	Yes	3 nights hotel	Yes, from conference airport to hotel roundtrip	No	Comp
Award Winners	6-8	No	1 night hotel	No	No	No

*If any person falls into more than one category listed here (e.g. award winner is also the planning chair) reimbursement will be based on which of those positions receives the most reimbursement. No doubling-up will occur.

B. MISSING OR INADEQUATE DOCUMENTATION

When the original receipts of expenses that you are requesting reimbursement for have been lost or cannot be obtained, you need to provide other documentation that may support the validity of your expenses. Explain on the Expense Form why original receipts are not available, and indicate other documentation that you are providing to support your request to be reimbursed.

C. NON-REIMBURSEABLE EXPENSES

- Alcoholic beverages

- Personal necessities
- Those reimbursable expenses that are covered by another supporting group or agency
- Non-budgeted expenses

D. CANCELLED TRIPS

Depending on the type of ticket, airline, and circumstances the cost of the transportation ticket may or may not be reimbursable for travelers who cancel their trip. Travelers at risk for canceling their travel should purchase travel insurance at their own expense to prevent any loss of funds.

Travelers will be charged hotel fees if the proper cancellation notice has not been adhered to.

E. GRANT SPONSORED ACTIVITIES

Reimbursement request for expenses charged to grant projects are subject to the guidelines provided in this policy, unless the funding agency imposes greater restrictions. The terms of a particular grant or contract should be referred to for guidance on what expenses are allowed.

IAFN may arrange and pay for travel under grant related activities.

F. INDEPENDENT CONSULTANTS

Expenses incurred by independent consultants may be reimbursed when travel itself is legitimate and authorized, when expenses are deemed permissible by this Policy, and expenses are not part of the service/contract fees. Original receipts are necessary for reimbursement. When no original receipts are provided, the reimbursement will be reported on IRS Form 1099.

A contract, W9 (If contractor is new) and email address must be submitted to the finance director along with the department to which expenses should be coded prior to the start of the project.

A complete breakdown of covered expenses with a list of individuals who will qualify for reimbursement must be provided to the finance department prior to the start of the project. All submitted invoices and expense reports must be reviewed and approved by the lead staff person assigned to the project.

G. Non-Conference Required Travel Table

	Air (coach)	Lodging	Ground transport	ME & I	Mileage	Parking
IAFN Staff	Yes	Yes	Yes, from destination airport to final location	Yes, excluding meals provided	If driving instead of flying	Yes-airport parking OR Yes-site parking fees if driving
IAFN Board	Yes	Yes	Yes, from destination airport to final location	Yes, excluding meals provided	If driving instead of flying	Yes-airport parking OR Yes-site parking fees if driving

Policy 4.2 Appendix 1
Travel Reimbursement Approval

Individual traveling: [Click or tap here to enter text.](#)

Date of Form Completion: [Click or tap here to enter text.](#)

Purpose of Travel: [Click or tap here to enter text.](#)

Dates of Travel: [Click or tap here to enter text.](#)

Cost of roundtrip coach airfare: [Click or tap here to enter text.](#)

Roundtrip miles if driven: [Click or tap here to enter text.](#)

Cost of mileage reimbursement at current rate: [Click or tap here to enter text.](#)

Employee Signature: _____

Approved

Denied

Reason for denial: [Click or tap here to enter text.](#)

CEO Signature: _____