



# Create Expense Reimbursement - Submitter

Instructions for creating Expense Reimbursement (no Specialized Account Coding).

Step 1



From the CalATERS web site at

[www.calaters.ca.gov](http://www.calaters.ca.gov), click

**CalATERS**

Step 2



Key User ID and Password.

Click

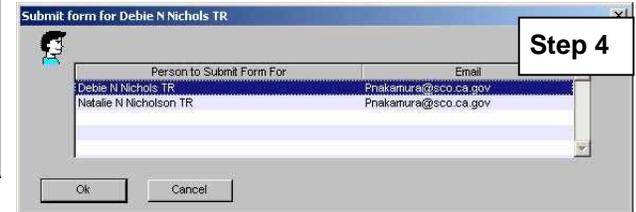
Sign In

Step 3



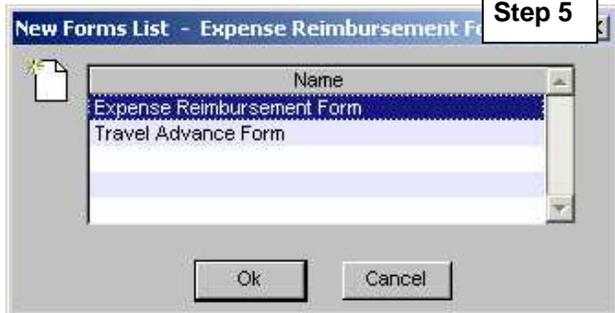
From the Work Queue, click on the  icon.

Step 4



Click on the employee for whom you are submitting the form.

Step 5

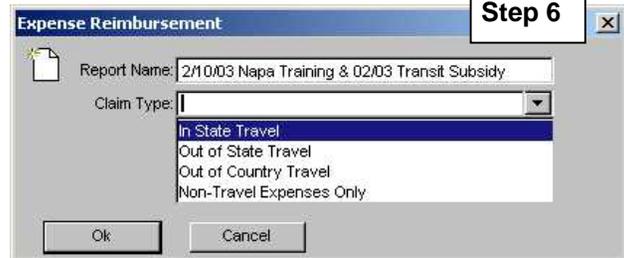


Select "Expense Reimbursement Form" and

click

Ok

Step 6



Key the report name (based on department policy) and select a claim type – In State Travel, Out of State Travel, Out of Country Travel or Non-Travel Expenses Only.

Click

Ok

Step 7  
Information



If you need to exit the form before completion,

click , then File, Close. The form will be saved as a draft.



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Click on next tab, 2. Trip/Expense Categories.

**Step 8**

Selection of Trip or Expenses

Select from the following list:

- Long Term Assignment
- Non-State Sponsored Conference/Convention
- Regular Travel
- State Sponsored Conference/Convention

Applied Trips

| Trip Type      | Dates               |
|----------------|---------------------|
| Regular Travel | 02/07/03 - 02/10/03 |

Regular Travel

First date of Trip: 02/07/03 Start Time: 0600 Trip Name: Napa  
 Last Date of Trip: 02/10/03 End Time: 1000 State vehicle used? No  
 Trip Location: Napa Was Trip > or = 50 miles from Home/Headquarters? Yes  
 Trip Purpose: Provide training in Napa. License Number: #1234

Click , select the Trip Type and complete fields. Click . Up to four trips can be added to one form. Click tab 3. Expenses.

**Step 9**

|               | Fri Feb 7     | Sat Feb 8     | Sun Feb 9     | Mon Feb 10   | Totals        |
|---------------|---------------|---------------|---------------|--------------|---------------|
| Breakfast     | 8.00          | 8.00          | 8.00          | 8.00         | 18.00         |
| Lunch         | 10.00         | 10.00         | 10.00         | 10.00        | 30.00         |
| Dinner        | 18.00         | 18.00         | 18.00         | 18.00        | 54.00         |
| Lodging       | 94.00         | 94.00         | 94.00         | 94.00        | 292.00        |
| Incidentals   |               |               |               |              | 18.00         |
| Auto Rental   | 152.00        | 9.00          | 9.00          | 9.00         | 152.00        |
| <b>Totals</b> | <b>274.00</b> | <b>134.00</b> | <b>134.00</b> | <b>12.00</b> | <b>554.00</b> |

Expense: Auto Rental Date: 02/07/03 Amount: 152.00  
 Payment type: Direct Charge Contracted Provider: Avis Rent A Car System, Inc Location: Sacramento

A tab will display for each trip that was added. Click the in left column, select and key expenses for all trips. Click tab 4. Completion.

**Step 10**

Summary

|                         |        |
|-------------------------|--------|
| Total Expense Amount    | 599.00 |
| Travel Advance Recovery | 0.00   |
| Direct Charge           | 152.00 |
| Amount Due Employee     | 447.00 |

Trip(s) Summary

| Trip Name       | Amount |
|-----------------|--------|
| Transit Subsidy | 45.00  |
| Napa            | 564.00 |

Review the Receipts, Review Items and Travel Advance Recovery tabs (if applicable). Review Summary, then click Submission tab.

**Step 11**

Submission

I hereby certify that:

- I am authorized by my department to submit expense reimbursement requests on behalf of the herein named employee;
- The information contained within this expense reimbursement request is consistent with the completed and signed paper expense reimbursement request received from the employee; and
- The completed and signed paper expense reimbursement request received from the employee will be retained in accordance with my department's retention policy.

Change Approver  
Add Approver

Submit

The Submission tab displays the employee's default approver. If necessary use **Change Approver** to select a different approver for this form, or **Add Approver** to add an additional approver.

Key your password and click

**Step 12**

Select Receipts Address

Select Receipt Address from the following list:

| Name           | Street             | City, State Zip       |
|----------------|--------------------|-----------------------|
| SCO-Training   | 300 Capitol Mall   | Sacramento, CA 95814  |
| SCO-TrainingLA | 400 Central Avenue | Los Angeles, CA 90001 |

Ok

Select a Receipt Address. Click

**Step 13**

Attach Receipts to the Transmittal Sheet and place in an EXTERNAL envelope addressed exactly as shown below. If you are unable to print the Transmittal attach your receipts to a piece of paper with the REA #, Authorization form (USMA), number, your name, serial number, total expense amount, last date of expense.

Eileen N McDonald TR

SCO-Training  
300 Capitol Mall  
Sacramento, CA 95814

Key: TEA000000279

U.S. Postal Service

Print Report by selecting a print option.

No Print  
Transmittal Page  
Transmittal Page with Summary  
Transmittal Page with Summary and Details

Ok Print Preview Cancel

Click to select print options to print reports then click . Attach receipts to the Travel and Expense Transmittal sheet to be reviewed by the person (s) designated by your department (approver and/or accounting office).