



**COMMAND INFORMATION OFFICE (CIO)**

**TRAVEL REQUESTS/CLAIMS**

**STANDARD OPERATING PROCEDURES**

**Version 1.1**

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NAVSEA COMMAND INFORMATION OFFICE

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## 1. PURPOSE

The purpose of this document is to specify the Standard Operating Procedures for processing travel orders and claims within SEA 00L.

## 2. PROCEDURES

### 2.1 WHEN A TRAVEL REQUIREMENT IS IDENTIFIED:

1. The traveler will complete the travel request form (see Appendix A) and forward it electronically to their DCIO via their supervisor. Note that the travel request form shall also be used for authorization of all contractor support services travel.
2. The DCIO will forward the approved request to the AO at least two weeks prior to travel for entry into TOPS/DTS. The AO will also enter the planned travel into the Travel Voucher Log.
3. If the AO makes the travel arrangements, they will send a flight itinerary to the traveler within three days of receipt of the approved travel request.
4. The traveler must advise the AO of any changes required in the travel itinerary.
5. The Travel Office will send an email to the traveler when the travel orders are ready for pick-up. The traveler will forward this email to the AO requesting pick-up of the orders.

### 2.2 TO SUBMIT A TRAVEL CLAIM:

1. The traveler has **five** days to submit a DD form 1352-2, Travel Voucher, or an SF-1164, Claim for Reimbursement for local travel. The traveler must submit **ALL** paperwork received from travel, ***including their itinerary***. Failure to do so will result in a delay in reimbursement. All required receipts will be included with the claim.
2. Their supervisor will sign the approving official block on the travel voucher.
3. The traveler should keep a copy of the approved travel voucher and all receipts. The original signed travel voucher and required receipts will be submitted to the AO.
4. The AO will forward the travel voucher for processing. The AO will also enter the date of receipt of the voucher into the Travel Voucher log. It takes at least two weeks before payment is received.
5. If the traveler receives their credit card bill prior to receipt of the claim reimbursement, they are still required to make payment.

### **2.3 TRAVEL VOUCHER LOG**

1. The CIO Office shall maintain a recordkeeping system to track the submission of travel vouchers and receipt of claim reimbursement. The information in Attachment 2 shall be contained in this Travel Voucher Log.
2. Employee supervisors are responsible and accountable for ensuring the accuracy of the Travel Voucher Log, as well as for the review, approval and signature of employee vouchers. They also must ensure that their employees submit the travel voucher within five days of return from travel.
3. Employees are responsible and accountable for submitting their travel voucher to their supervisor within five days of return from travel and for reporting to the AO the date they receive their claim reimbursement.

Any questions relating to travel should be directed to the AO.

APPENDIX 1: TRAVEL REQUEST FORM

<b>DATE:</b>		
1. TRAVELER'S NAME:		
2. PURPOSE OF TRAVEL: ATTACH AGENDA AND DISCUSS WHAT TRAVELLER(S) EXPECT TO ACCOMPLISH:		
3. PROVIDE JUSTIFICATION OF WHY TRAVEL IS NECESSARY INSTEAD OF VTC OR TELECONFERENCE:		
4. ARE CONTRACTOR SUPPORT SERVICES REQUIRED? YES <input type="checkbox"/> NO <input type="checkbox"/>		
5. IF YES, LIST NAME(S), THEIR PURPOSE, AND WHAT SPECIFIC DELIVERABLES CONTRACTOR(S) PROVIDE AS A RESULT OF TRAVELING.		
NAME	PURPOSE	DELIVERABLES
PROVIDE NAMES OF OTHER GOVERNMENT TRAVELERS.		
WHAT DOES EACH GOVERNMENT TRAVELER NEED TO ACCOMPLISH BY TRAVELING?		
NAME	PURPOSE	
6. PROVIDE JUSTIFICATION OF WHY THIS NUMBER OF TRAVELERS IF REQUIRED. CAN SOME PARTICIPATE VIA VTC OR TELECONFERENCE?		
7. <b>MODE OF TRANSPORTATION</b> AIR <input type="checkbox"/> POV <input type="checkbox"/> RENTAL CAR <input type="checkbox"/> RAIL <input type="checkbox"/> <b>HOTEL/BEQ</b> SMOKING <input type="checkbox"/> NON SMOKING <input type="checkbox"/> PREFERRED HOTEL: _____		
8. TDY ITINERARY (complete Box 8-12 or attach SATO itinerary if AO is not making your arrangements)		
DATE	ACTIVITY/CITY/STATE	
9. NO. OF DAYS _____ DEPARTURE DATE/TIME _____ RETURN DATE/TIME _____		
10. DEPARTING FROM WHICH AIRPORT: REAGAN NATIONAL <input type="checkbox"/> DULLES <input type="checkbox"/> BWI <input type="checkbox"/> NONE <input type="checkbox"/>		
SEAT ASSIGNMENTS: AISLE <input type="checkbox"/> WINDOW <input type="checkbox"/>		
11. TRAVEL BY POV MILEAGE ESTIMATE _____		
12. RENTAL CAR SIZE: COMPACT <input type="checkbox"/> INTERMEDIATE <input type="checkbox"/> FULL SIZE <input type="checkbox"/> <small>TRAVELER WILL COORDINATE WITH OTHER TRAVELLERS TO MINIMIZE NUMBER OF RENTAL CARS</small>		
13. IS TRAVEL FOR TRAINING: YES <input type="checkbox"/> NO <input type="checkbox"/>		
14. <b>VISIT REQUEST REQUIRED?</b> YES <input type="checkbox"/> NO <input type="checkbox"/>		
15. ADDITIONAL COMMENTS:		
16. LATE JUSTIFICATION (IF REQUIRED):		
17. APPROVAL: APPROVED <input type="checkbox"/> DISAPPROVED <input type="checkbox"/> E-SIGNATURE <input type="checkbox"/> _____		
<b>DCIO</b>		
UPON RECEIPT OF APPROVAL, THE AO WILL ENTER THE TRAVEL ORDERS INTO TOPS		

