

AGENDA PLACEMENT FORM

(Submission Deadline – Monday, 5:00 PM before Regular Court Meetings)

Date: _____

Meeting Date: 5/28/2024

Submitted By: County Judge's Office

Department: _____

Signature of Elected Official/Department Head:

<p>Court Decision: This section to be completed by County Judge's Office</p>

<p>May 28, 2024</p>

Description:

Consider and Approve Updating Travel Policy to Remove Requirement that
Contiguous-County Travel Cannot be Approved on Consent Agenda

(May attach additional sheets if necessary)

Person to Present: Judge Boedeker

(Presenter must be present for the item unless the item is on the Consent Agenda)

Supporting Documentation: (check one) PUBLIC CONFIDENTIAL

(PUBLIC documentation may be made available to the public prior to the Meeting)

Estimated Length of Presentation: _____ minutes

Session Requested: (check one)

Action Item Consent Workshop Executive Other _____

Check All Departments That Have Been Notified:

County Attorney IT Purchasing Auditor

Personnel Public Works Facilities Management

Other Department/Official (list) _____

**Please List All External Persons Who Need a Copy of Signed Documents
In Your Submission Email**

TRAVEL POLICY OF JOHNSON COUNTY

Effective May 28, 2024

Travel Required By Law & Same Day Travel

Commissioners Court does not require Court approval for travel to seminars, conferences, or training that is **required by law** or for any travel that will be **completed within the same day**, i.e., a destination that is close enough that there is no overnight stay needed. In this case, "required" travel would be that which is incurred to meet the legal education requirements of an individual's position with the County as set by Texas statute or required to maintain a license required for the position. All other education-related travel must be placed on the agenda for approval by the Commissioners Court.

Travel Reimbursement – Per Diem

Johnson County will reimburse for travel expenses, including meals, using a per diem rate when employees are traveling on official County business.

The per diem rates will be published by the County Auditor's Office each fiscal year or whenever the rates change. The Auditor will determine the rate by adding the breakfast, lunch, and dinner reimbursement rate published by United States General Services Administration's Standard Rate for Texas (as utilized by the Texas Comptroller) but excluding the additional allowance for incidental travel expenses.

Reimbursement for the first and last days of travel will be set to a rate equal to 75% of the full day travel rate. Per diem or reimbursement of meals for same-day trips (there and back in the same day) will be permitted at a flat rate of 50% of the full day per diem rate. **As of the effective date of this policy, the rates are: \$54.00 for each full day of travel, \$40.50 for the first and last days of an overnight trip, and \$27.00 for same-day travel.**

Same-day travel per diem is a taxable fringe benefit under IRS rules, so same-day travel per diem will be reimbursed through payroll in the first regular pay period following the approval of the reimbursement. All other per diem and travel reimbursements will be handled by the Accounts Payable Division of the County Auditor.

Receipts are NOT required for the reimbursement of the per diem at the rates above.

Advancement of Per Diem

In order to alleviate any financial hardship associated with mandatory travel, the Commissioners Court has authorized the advancement of per diem. An employee seeking such an advancement must complete the Travel Advance Form indicating 1) the number of days of full and partial days of travel and 2) the failure to receive an advancement would create a financial hardship. Advances will be paid following the Commissioners Court meeting immediately before the scheduled departure date.

A person receiving a travel advancement must complete a Travel Reimbursement Form no later than ten (10) days after returning from travel. Failure to complete the Travel Reimbursement Form in a timely manner will result in taxes being withheld on the amount advanced in accordance with IRS regulations. If an advancement exceeds the total amount of travel reimbursement to which the employee was entitled, the excess shall be repaid to the County via payroll deduction.

The Travel Advance and Reimbursement Forms [EXHIBIT B & EXHIBIT C] can be obtained from the **County website (<http://joconet/>) under EMPLOYEE RESOURCES/AUDITOR.**

A requisition for travel reimbursements and advances must be submitted to a Purchasing Agent to obtain a purchase order [EXHIBIT A]. The signed and approved reimbursements and advances will then be receipted against the appropriate purchase order(s) [EXHIBIT D] and processed through the Accounts Payable Division of the Auditor's Office.

Mileage Reimbursement

Mileage reimbursement will be paid at the same rate as is allowed by the IRS. The current rate can be found on the Travel Reimbursement Form [EXHIBIT C] found on the **County website (<http://joconet/>) under EMPLOYEE RESOURCES/AUDITOR.**

When traveling by motor vehicle, the distance traveled will be determined by Google Maps, MapQuest, or other electronic navigational program showing the miles from departure to destination location. Use your normal work location as the departure address. The same method will be used for travel from your hotel to your meeting location. Employees are encouraged to use the form of travel that is the most economical.

Air Travel – If travel is by airplane, the travel costs associated with the air travel will be reimbursed so long as the difference between the air travel costs and the mileage calculation for traveling by motor vehicle does not exceed ten percent (10%). Airport parking and travel within the destination city (such as a car rental, taxi, or Uber) are also reimbursable subject to the above cap. For example, if the mileage calculation for travel by motor vehicle is \$300.00, the County will reimburse up to \$330.00 for air travel. Under no circumstances will the maximum travel reimbursement exceed the calculated mileage reimbursement plus ten percent (10%).

Parking and Tolls – Parking fees and tolls actually paid by the traveler may be reimbursed with sufficient backup documentation. The traveler should not seek reimbursement of valet parking unless no self-parking option was available at the location. Tips and gratuities will not be reimbursed by the County.

Intra-County Mileage Reimbursement

Employees and Officials who receive a travel allowance as part of their compensation are not eligible for intra-county mileage reimbursements.

If the employee reports to a location other than their normal workplace for work or training and does not report to their normal workplace at all that day, no mileage reimbursement will be made.

If the alternative work location represents a significantly longer distance to travel than the normal workplace, then the mileage will be reimbursed.

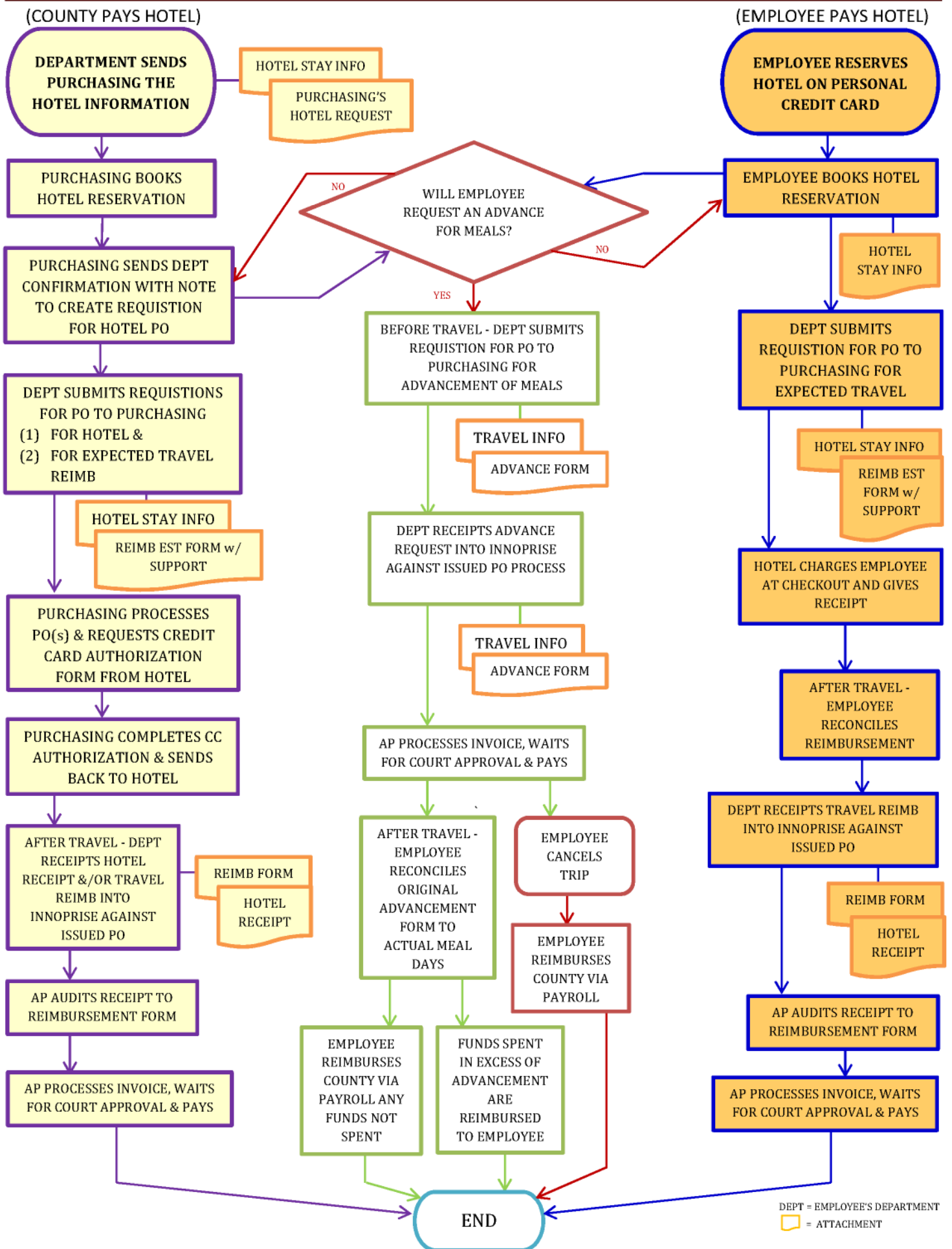
If the employee reports to their normal workplace during their regular work hours and must travel to another location (midday travel) for work purposes and return, mileage may be claimed from the normal workplace to the other location and back (ROUND TRIP).

If the employee reports to the normal workplace during regular work hours with midday travel to another location with no return that day, mileage may be claimed (ONE WAY).

Out-Of-State Travel

Any out-of-state travel must be approved by the Commissioners Court. The traveler must show that such a trip is beneficial to the County. Out-of-state travel should be avoided if possible. These requests will be placed on the Commissioners Court as an action item.

HOTEL RESERVATION AND TRAVEL PAYMENT FLOWCHART





Johnson County PURCHASE ORDER

PO 23-####

THIS NUMBER MUST APPEAR ON ALL
INVOICES, PACKAGES, SHIPPING
PAPERS AND CORRESPONDENCE.

EXHIBIT A

PAGE NO. 1 of 1
DATE OF ORDER: 03/01/2023

Vendor Name and Address

Jane Smith
DEPARTMENT

Attention To:

Ship To: EMPLOYEE DEPT
DEPT ADDRESS, STE
CITY, TX 76####

VENDOR NO.		SHIP VIA		F.O.B.		TERMS		BUYER	
02201		BESTWAY		DESTINATION		NET30		Travel	
DELIVER BY DATE		HISTORICAL PO NO.		REQUISITION NO.		REQUISITION BY			
09/30/2023				R23-####		Employee Name			
LINE NO.	QUANTITY	UOM	ITEM NO. & DESCRIPTION			UNIT COST	EXTENSION		
1	193.88	EA	Mileage - Jane Smith - 2023 TAC Legislative Conference - Austin, TX - 08.30.23 - 09.01.23 FUND-DEPT-OBJECT-FN			\$1.00	\$193.88		
2	135.00	EA	Meal Advancement - Jane Smith - 2023 TAC Legislative Conference - Austin, TX - 08.30.23 - 09.01.23 FUND-DEPT-OBJECT-FN			\$1.00	\$135.00		
3	643.57	EA	Hotel - Jane Smith - 2023 TAC Legislative Conference - Austin, TX - 08.30.23 - 09.01.23 FUND-DEPT-OBJECT-FN			\$1.00	\$643.57		
4	135.00	EA	Meals - Jane Smith - 6th Annual CDCAT Fall Conference - College Station, TX - 09.11.23 - 09.13.23 FUND-DEPT-OBJECT-FN			\$1.00	\$135.00		
5	193.88	EA	Mileage - Jane Smith - 6th Annual CDCAT Fall Conference - College Station, TX - 09.11.23 - 09.13.23 FUND-DEPT-OBJECT-FN			\$1.00	\$193.88		
						TOTAL	\$ 1,301.33		

NOTE: Jane Smith entered a 2nd set of upcoming travel details, creating a blanket PO effect.

2nd travel details are not used in the supplemental examples related to this PO. It is just here as an option for the department requisitioning a PO.

TAX EXEMPTION NO. 75-6001030

TERMS AND CONDITIONS:

By fulfillment of this order vendor accepts all Johnson County Terms and Conditions which are available online at <http://www.johnsoncountytexas.org/departments/purchasing/terms> or by contacting Purchasing at 817.556.6384

Ralph McBroom
Authorized By:

ALL INVOICES MUST SHOW PURCHASE ORDER NUMBER

EXHIBIT B

JOHNSON COUNTY TRAVEL ADVANCE * FORM

**This form to be used only to request advancement of Meals.*

RECEIPT AGAINST APPROVED PURCHASE ORDER

PLEASE TYPE OR PRINT THE FOLLOWING:

TODAY'S DATE : 08.18.23
 TRAVELER'S NAME : Jane Smith
 PURPOSE OF TRIP : 2023 TAC Legislative Conference
 DESTINATION CITY : Austin, TX
 DEPARTURE DATE : 08.30.23 EXPECTED RETURN DATE : 09.01.23

TRAVEL COSTS TO BE ADVANCED	AMOUNT	Auditor Use Only
NOTE: If there will be no overnight stay, meals will not be advanced. Meals for same-day travel will be reimbursed to the traveler as a part of their payroll check in the first payroll period following the submission of an approved reimbursement form.		
MEALS (EXPECTED)		
FULL DAY	# OF DAYS 1 X \$54 PER DAY	\$ 54.00
FIRST/LAST DAY	# OF DAYS 2 X \$40.50 EACH	\$ 81.00
TOTAL AMOUNT REQUESTED FOR ADVANCEMENT		\$ 135.00

I have reviewed the County's Travel Policy, and I understand this advance is to be used only for meal expenses related to the above-approved travel and I will submit a properly completed **TRAVEL REIMBURSEMENT FORM** within 10 days of my return. I understand that failure to complete the travel reimbursement form in a timely manner will result in taxes being withheld on the amount advanced in accordance with IRS regulations. I also certify that, financially, I will be unable to make this trip without the requested advance.

Jane Smith
 Signature of Traveler

DATE: 08.18.23

CERTIFICATION OF OFFICIAL OR DEPARTMENT HEAD: "I certify that the above named employee received proper authorization for official county travel. I have examined the request and approve the same for payment."

Department Head
 Signature of Elected Official/Department Head

DATE: 08.18.23

****REQUIRED****

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 #### -
 54100 -
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 FUND DEPT OBJECT FUNC
 ACCOUNT #

EXHIBIT C

JOHNSON COUNTY TRAVEL REIMBURSEMENT* FORM

**This form is to be used only to request reimbursement of expenses paid by traveler's personal cash or credit card. Completed & signed by traveler after return from travel.*

RECEIPT AGAINST APPROVED PURCHASE ORDER

PLEASE TYPE OR PRINT THE FOLLOWING:

TODAY'S DATE : 09.05.23
 TRAVELER'S NAME : Jane Smith
 PURPOSE OF TRIP : 2023 TAC Legislative Conference
 DESTINATION CITY : Austin, TX
 DEPARTURE DATE : 08.30.23 RETURN DATE : 09.01.23

TRAVEL COSTS		AMOUNT	Auditor Use Only
AIR FARE		\$	\$
AUTO RENTAL		\$	\$
MILEAGE	MILES (AS OF 01/01/23) 296 X \$0.655 PER MILE **	\$ 193.88	\$
MEALS (ACTUAL) NOTE: If there is no overnight stay, meals are reimbursed through payroll!			
FULL DAY	# OF DAYS 1 X \$54 PER DAY	\$ 54.00	\$
FIRST/LAST DAY	# OF DAYS 2 X \$40.50 PER DAY	\$ 81.00	\$
SAME-DAY (SUBMIT TO PERSONNEL)	# OF DAYS 0 X \$27 PER DAY	\$ -	\$
HOTEL/MOTEL		\$ 643.57	\$
SEMINAR/TRAINING REGISTRATION FEE		\$	\$
MISCELLANEOUS (Taxi, parking, etc.)		\$	\$
LESS AMOUNTS ADVANCED (from Advancement Form)		\$ 135.00	\$
TOTAL AMOUNT REQUESTED FOR REIMBURSEMENT		\$ 837.45	\$

I have reviewed the County's Travel Policy, and I understand reimbursement will only be made for audited expenses that fall within the limits of county policy and I have attached all appropriate receipts.

****Calculated from your place of work address to your destination address.**

Jane Smith DATE: 09.05.23

 Signature of Traveler

CERTIFICATION OF OFFICIAL OR DEPARTMENT HEAD: "I certify that the above named employee received proper authorization for official county travel. I have examined the request and approve the same for payment."

Department Head DATE: 09.05.23

 Signature of Elected Official/Department Head

****REQUIRED****
 #### - #### - 54100 - ##
 FUND DEPT OBJECT FUNC
 ACCOUNT #

EXHIBIT D

TRAVEL RECEIPTING EXAMPLE

PACKING SLIP INFO FOR REIMBURSEMENTS = "R"+LAST DATE OF TRAVEL+LAST NAME ex. R090123SMITH

Receipt		Post Date
Packing Slip#	<input type="text" value="R090123SMITH"/>	
Effective Date	<input type="text" value="09/04/2023"/>	
Purchase Order	<input type="text"/>	
Vendor		
Vendor Phone		
Received By	<input type="text" value="Choose one..."/>	
Inventory Journal#		
Invoice#		
Comments	<div style="border: 1px solid gray; height: 60px; width: 100%;"></div> characters left:	
PO Line #	Quantity	Warehouse
		Part
		Serial

PACKING SLIP INFO FOR ADVANCEMENTS = "A"+FIRST DATE OF TRAVEL+LAST NAME ex. A083023SMITH

Receipt		Post Date
Packing Slip#	<input type="text" value="R083023SMITH"/>	
Effective Date	<input type="text" value="08/18/2023"/>	
Purchase Order	<input type="text"/>	
Vendor		
Vendor Phone		
Received By	<input type="text" value="Choose one..."/>	
Inventory Journal#		
Invoice#		
Comments	<div style="border: 1px solid gray; height: 60px; width: 100%;"></div> characters left:	
PO Line #	Quantity	Warehouse
		Part
		Serial