Entering an Expense Reimbursement in Skyward

Employee is Responsible for:

- 1. All employees enter their own Expense Reimbursements (ER) in Skyward.
- 2. Employees entering an ER for the first time contact Ju<u>lie Karonka</u> in Purchasing to be set up as a vendor.
- 3. Employees will be reimbursed to their direct deposit account on file with Payroll. ER's will post to your account as a single deposit, and will not be included in your monthly pay. ER's can be deposited on any date.
- 4. When entering an ER in Skyward employees must select a Pre-verifier from the drop down menu. (Normally their campus/department secretary)
- 5. Once the detail line item information has been added, the employee is required to select an account code from the drop down menu. If the account code is not found in the drop down list, the employee can type in the account code provided to them by their campus/department secretary.
- 6. After the employee attaches the documentation to the ER, they will give the originals to their secretary. Original documentation is not required in the business office but must be retained at the campus/department level for auditing purposes.

Campus Secretary is Responsible for:

- 1. At the campus/department level, employee reimbursements should be checked for proper paperwork to include the Travel A and B Form, proper back up for expenses claimed and legible itemized receipts. (See Pg. 2) Claimed expenses on Travel B Form should match what is entered for reimbursement and attached to the ER. Provide employee with the correct Account Code and Purchase Order numbers.
- 2. When employee reimbursements have been verified and approved at the campus/department level, they are routed to the Finance Department for processing.
- 3. If the ER is denied, an email notification with the denial reason will be sent to the employee who entered the ER. The employee that entered the ER will be required to make the necessary corrections, and resubmit the ER and the verification and approval process will start again.

List of Required Expense Attachments

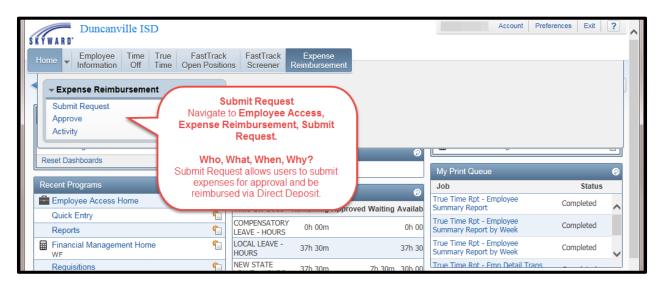
If Applicable:

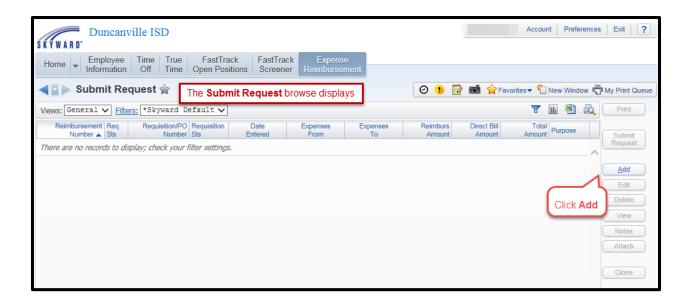
- MapQuest Directions from campus/dept. to your ending destination. Also include reverse directions from your destination back to your campus/dept.
- **2. Proof of Attendance** Copy of your Conference ID badge, Certificate of Attendance, Handout, etc.
- 3. Parking Receipt
- 4. Baggage Claim Receipt
- 5. Itemized Hotel Receipt
- 6. Airfare Boarding Pass-Departure & Return
- 7. Travel A & B Forms Please include the Purchase Order# and/or Check Request# on your A & B Forms. Attach both forms with written signatures to your ER.

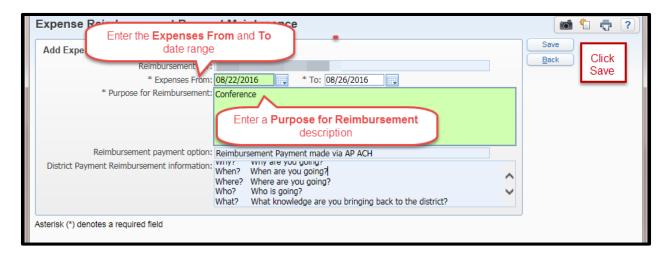
| Enter Purchase Order (PO)# or Check Request (CR)# below if applicable: | | | | | | | | | |
|--|---------|--|--|--|--|--|--|--|--|
| Conference/Workshop: | Add PO# | (attach proof of attendance) | | | | | | | |
| Hotel: | Add-CR# | (attach itemized hotel statement) | | | | | | | |
| Airfare: | Add-PO# | (attach boarding passes for depart & return) | | | | | | | |

- **8. Vehicle Rental-**Will require rental agreement and fuel receipts. (In this instance mileage cannot be used)
- **9. Meal receipts-**Mandatory if using Grant or Federal Funds

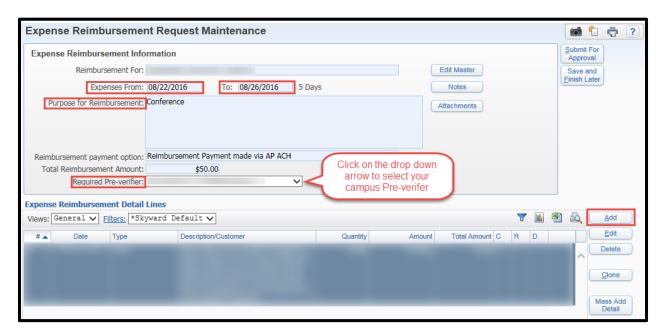
Please noteIf this is your first time submitting an Expense Reimbursement, please contact Julie Karonka (jkaronka@duncanvilleisd.org) to create a reimbursement vendor profile.





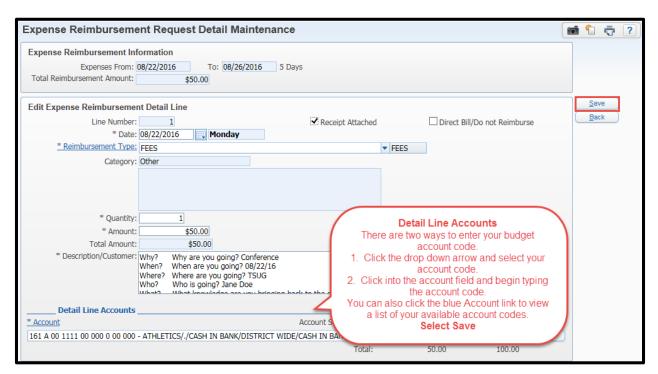


At this point you may want to highlight and copy the Why, When, Where, Who, and What located in the **District Payment Reimbursement information** box. You will paste this in the Expense Detail in the next step. Click Save.

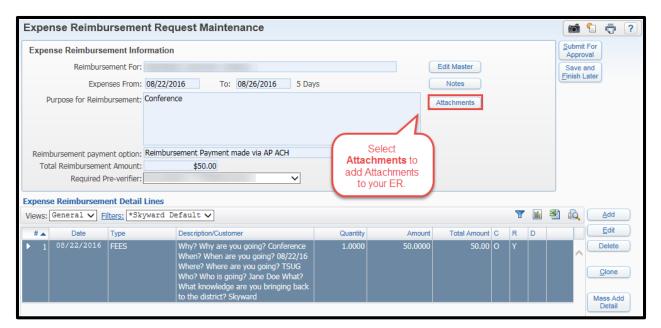


Add the date range for your Expenses, and your Purpose for Reimbursement. Next select the down arrow on your Required Pre-verifier and select the Pre-verifier assigned to your campus. Click Add.

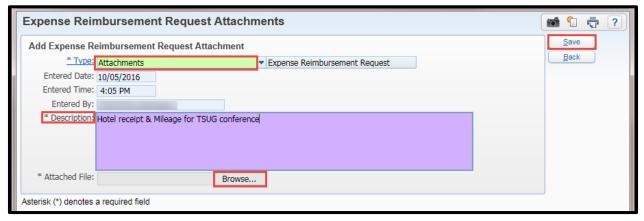
| Expense Reimburseme | ent Request Detail Maintenand | e | | | | | | | ₸? |
|---|---|--|---------------|-----------|-------------|--------------------------------------|---|---|---------|
| Expense Reimbursement Information Expenses From: 08/22/2016 To: 08/26/2016 5 Days Total Reimbursement Amount: \$50.00 | | The Expense Reimburse Information caries forward previous screen | | | rd from the | | | | |
| Edit Expense Reimburseme | nt Detail Line | | | | | | | <u>S</u> av | = |
| Line Number: | 1 | ✓ Receip | t Attached | | Dire | rt Bill/Do not Rein | mburse | <u>B</u> ac | k |
| * Date: | 08/22/2016 Monday | | | | | Enter the D | etail Line | nformati | ion |
| * Reimbursement Type: | FEES | | | ▼ FEES | | | he open fi | | |
| Category: | Other | | | | | Reimburs | | eck this b ttached. pe -Use th | ООХ |
| * Quantity: | 1 | | | | | | ement type | | S |
| * Amount: | \$50.00 | | | | | | determine th | | |
| Total Amount: | \$50.00 | | | | | 0.110 | d Amount fie | | |
| * Description/Customer: Detail Line Accounts | When? When are you going? 08/22/16 Where? Where are you going? TSUG Who? Who is going? Jane Doe | back to the distri | ict2.Clasused | \$ | | fields will reimburs Descripti | and Amou be determi sement type above. ion/Custor | ned by the selected ner-This i | e is |
| * Account | | Account Sele | ction 2 | Δπ | nount | | u will copy, p | | |
| | - ATHLETICS/./CASH IN BANK/DISTRICT WII | | | | 50.00 | complete th | e vvny? vvn plete this in | | |
| 101 % 00 1111 00 000 0 00 00 | ATTRETTES / (CAST IN DAMY DISTRICT WIL | DEJ GROTT IN DAIN | Total: | | 50.00 | 2001 | | | |



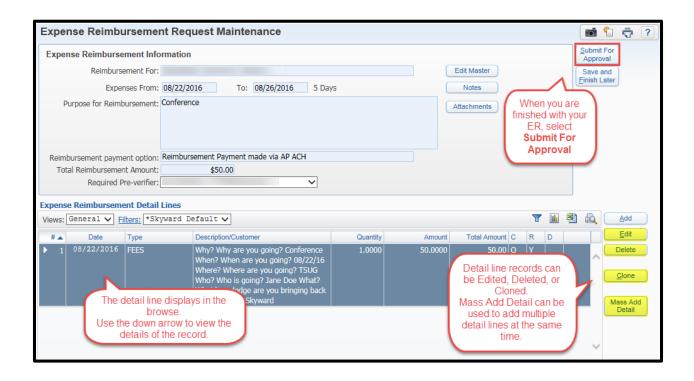
Please note: If you select **BACK**, it will close the ER without saving.



Select the **Attachments** tab to add attachments such as receipts, completed travel forms, mileage maps, etc.



Select Add File, then select **Type**: Attachments. Add your **Description**, then select **Browse** to attach your scanned documents. Once all of your documents are attached, select **Save**.



This concludes the Tutorial