SF 4601-C (7-2008) Supersedes (8-2 NONEMPLOYEES EXPENSE VOUCHER INSTRUCTIONS

Voucher expenses biweekly or upon return from trip, whichever occurs first. Vouchers should preferably be typewritten.

- Keep a daily record of expenses. Use form SF 4601-C worksheet to record expenses as they are incurred.
 Explain unusual expenses on travel invoice line 32.
- Attach the following to the original voucher:
- Funds Advance form if funds received
- Original receipts for airfare, car rental, lodging (requires receipts regardless of amount).
- Itinerary from Designated Travel Agent, if applicable. (ALL PAGES INCLUDING SUMMARY.)
- Copy of Employment Interview Invitation Letter, if applicable, as outlined in Staffing: Sourcing & Select Manual (Chapter 2)
- Copy of signed No-Fee Agreement form, if applicable, as outlined in Financial Manual Chapter 17.
- -Final approval levels are covered in Staffing: Sourcing & Selection Manual (Chapter 2) for employment applicants and non-employees,

Financial Manual . (Chapter 17)

GENERAL INFORMATION

- Line 1: Complete all boxes. Email address is required. Name entered must be your legal name (First Name, Middle Initial, Last Name).

 Remit to Address must be your home or business mailing address. DO NOT use a Sandia internal mailing address.
- Line 2: Enter expenses from and thru dates.
- Line 3: Check the appropriate box and provide requested information or attachments. Also indicate negotiated fee.
- Line 4: If this voucher is a supplement to another voucher (2nd voucher for the same trip), check the supplemental voucher box.
- Line 5: Enter daily dates of travel. If voucher is for more than 7 days use second voucher. Complete Cost Distribution and Analysis of Balance on last page only.
- Line 6: Enter city/state/or country of departure on "from" line; enter city/state/or country of arrival on "to" line.
- Line 7: INSTRUCTIONS FOR COMPUTING PAY FOR TRAVEL TIME
 - Payment will be for the scheduled air travel time by most direct route between airport at point of origin of trip and airport and destination where service will be performed, and return; time to be calculated upward to the nearest quarter hour. In addition, reasonable time for local travel to and from the airport at point of origin of the trip at the destination where service will be performed, calculated upward to the nearest quarter hour, may be added not to exceed four hours for the entire trip.
 - One hour of time will be allowed for each forty miles of distance traveled between points where air travel is not regularly scheduled or actual time en route, whichever is less.
 - Delays due to weather, equipment failure, etc., will not be considered in computing payment for travel time.
- Line 8: Enter number of hours worked each day. May use separate spreadsheet if hours worked covers more than 7 days.
- Line 9: Enter total number of hours travel time (Line 7 + Line 8) claimed each day. Enter, in last box, total number of hours claimed on voucher
- Line 10: Enter total amount of payment for time worked (total hours claimed multiplied by fee negotiated (Line 3)), in Box A.

TRANSPORTATION EXPENSES

- Line 11: Enter amount of air fare. Justification for domestic air fare exceeding \$1000.00 should be noted on line 32. Tickets issued to you through Sandia should also be included in your total for Box G.

 Attach original receipt.
- Line 12: Enter car rental cost only under date car was returned. Justification for rental car upgrade should be noted on line 32. Attach original receipt.
- Line 13: Record cost of gas for the rental car under date(s) purchased. Attach original receipt if \$75 or more
- Line 14: Enter amount of airport and/or hotel parking charges on a daily basis. Attach original receipt if \$75 or more.
- Line 15: Enter costs for taxi, shuttle or subway fares on dates incurred. Attach original receipt if \$75 or more.
- Line 16: Enter charges for tolls on dates incurred. Attach original receipt if \$75 or more.
- Line 17: Other transportation expenses, e.g., train fares; etc. Explain on line 32. Attach original receipt.
- Line 18: Record the cost of mileage for use of your personal vehicle using the current SNL reimbursement rate. Show calculation (miles X mileage rate) on line 32.
- Line 19: Total lines 11 through 18. Add the totals for each day and enter in Box B.

LODGING EXPENSES (DAILY ACTUALS)

NOTE: The daily Lodging rate entered on Line 20 should not exceed the daily Lodging per diem for the city of travel.

Line 20: Enter actual room costs by day per hotel receipt. Attach original receipt.

If there are extenuating circumstances, a memo justifying the amount over lodging per diem should be attached to the voucher.

Line 20a: Enter lodging per diem per GSA chart.

GSA Domestic Rate Chart

Line 20b: Adjust lodging tax %.

Line 20c: Enter lesser of Line 20 or 20a plus 20b. Add the totals for each day and enter in Box C.

NOTE: The daily meals and incidental expenses total (Lines 21 - 25) should not exceed the daily Meals & Incidental Expenses per diem for the city of travel.

Line 21 thru 23: Daily actual itemized cost of meals bought for oneself. Any individual meal \$75 or more requires original receipt.

Line 24: Record any cost for tips to baggage handlers, maids, waiters, or waitresses, etc.

Line 25: Enter legitimate incidental travel expenses allowed in your agreement with Sandia not otherwise specified above.

Furnish details of costs on line 32. Attach original receipt if \$75 or more.

Line 26: Total lines 21 thru 25. Add the totals for each day.

Line 27: Enter the per diem rate for meals and incidentals. This can be obtained from the Sandia Travel Handbook

(listed under "per Diem Rates") or from the IES Help Desk at 505-844-9377. If there are extenuating circumstances,
a memo justifying the amount over meals/incidentals per diem should be attached to the voucher.

Line 28: Enter the lesser of line 26 or 27. Add the totals for each day and enter in Box D.

OTHER BUSINESS EXPENSES

Line 29 thru 30: Enter legitimate travel expenses allowed in your agreement with Sandia not otherwise specified above.

Enter explanation on Line 32. Attach original receipt if \$75 or more.

Line 31: Total lines 29 thru 30. Add the totals for each day and enter in Box E.

Line 32: Explain all unusual costs; other transportation expenses (Line 17)*; other incidental expenses (Line 25)*; other business expense (Line 31)*; note personal car mileage calculation (Line 18)*; and, if Foreign Travel, note exchange rate used for calculations.

COST DISTRIBUTION

IMPORTANT: Please be sure to enter PO Line /ship #. Contact your SDR if you are not certain what line to charge.

Line 33: Enter the Project/Task No. and organization that these expenses should be charged to, and the amount to be charged to each.

The sum of amounts for cost distribution must equal Line F.

Expenditure Type - Nonemployee Travel

ANALYSIS OF BALANCE

Box A: Total amount of payment for time worked.

Box B: Total all transportation expenses (Line 19) for all days of travel.

Box C: Enter the lesser of total lodging (Line 20) or per diem (Line 20a) plus Line 20b.

Box D: Enter the lesser of total meals and other incidentals (Line 26) or per diem (Line 27).

Box E: Total other expenses (Line 31) for all days of travel.

Box F: Net nonemployee expense is the sum of boxes A, B, C, D, and E.

Box G: Enter the amount of funds and/or tickets advanced.

Box H: Box F minus Box G.

BEFORE YOU SUBMIT YOUR VOUCHER:

Have you signed and dated the voucher?

Have you obtained Sandia's approval?

Did you attach your itinerary (all pages); original receipts for hotel and travel vehicle; original receipts where indicated above,

and for other expenses \$75 or more?

VOUCHER SUBMISSION

Submit voucher to Sandia Delegated Representative (SDR) noted in your contract for review and approval/date/org. number/mail stop. Then submit voucher to Center Business Manager (CBM) for review and approval/date/org. number/mail stop.

After all signatures are obtained, SDR is to forward voucher to Accounts Payable, Org. 10503, MS 1385.

TYPES OF NON-EMPLOYEE EXPENSES

The Non-employee Expense Voucher form is used by non-employees to report labor and/or travel expenses.

These non-employees expenses include:

Speaker and lecturer services

Professional Service Provider services

Consultant and Specialized Consultant services

Former employee services

Employment Interview travel expenses

No Fee Agreement travel expenses (A signed and approved copy of the No Fee Agreement must be attached)

NOTE: The Staff Augmentation Contract Associate uses the Contract Associate Travel and Business Expense Invoice. (SF4601-CAT)
The Sandian who approves the expenses is responsible for reviewing the form for adherence to Federal Travel Regulations
(41 CFR 301, Appendix A) and ensuring that original receipts are attached to the original form. Receipts are required to substantiate airfare, rental car, and lodging expenses regardless of the amount. For other expenses, receipts are required only if \$75 or more.

EXPENSE RULES

The rules are as follows:

Airfare should not exceed the lowest logical airfare.

Lodging, meals and incidental expenses should not exceed the per diem amount specified.

Nonemployees (except for no fee service providers) residing in Albuquerque or Livermore will not be reimbursed for lodging, meals or incidental expenses incurred while on local travel (Local travel is defined as travel within a 50-mile radius of the office location which does not require an overright stay).

NOTE: In addition, the following costs are considered unallowable and will not be reimbursed by DOE.

Portion of the cost that exceeds the lowest available airfare

Travel costs in excess of CFR Regulations

Car rental and lodging expenses not substantiated with copies of receipts

Meals, local transportation, and incidental expenses of \$75 or more not substantiated with receipts

After approval is obtained and supporting documentation attached (as described in the instruction page of the form), send the form to Accounts Payable, Organization 10503 (MS 1385).

| | 801-C (7-2008) Supersedes (8-2007) n completing electronically, clic | k on each field to | o be filled in. | NONEMPLOY SEND TO SDI | R PER CONTR | RACT PRIOR TO | A/P SUBMITT | AL. | andia | National | Laboratories |
|--|--|---|------------------|--------------------------|-------------------------|--|---|------------------------|----------|-------------|--------------|
| 1. | egal Name (First Name, M.I., Last Name) | | | Social Security No. | | Phone Number | | | | | |
| Tax Reporting Name and Identification Num | | | r (per W-9 form) | | | | REQUIRED | E-Mail Address | | | |
| | Remit to Address | | | PAY METHOD: | Electronic (Check Wire | (Please complete | form SF 9424-EF | Т | | | |
| | Name of Principal Sandia Con | ntact | | | Org. | MS | Phone No. | | | | |
| 1a. | BUSINESS PURPOSE | | | | | Line 1a. Clearly d | escribe business pu | urpose of trip-provide | e unc | assified in | nfo. |
| 2.3.4. | Employment Interview (Attach Invitation Letter) | For expenses from thru Employment Interview Contract No. Ch Invitation Letter) Daily or Hourly Fee (REQUIRED use of form SF 95) | | | | | | | | ·A) | |
| | GENERAL INFORMATION | | | | | | | | | | |
| | DATES | | | | | | | | <u> </u> | TOT | ALS |
| 6. | TRAVEL from | | | | | 1 | | | | | |
| | DESTINATIONS to TRAVEL TIME | | | | | | | | | | |
| | HOURS WORKED | | | | | - | | | <u> </u> | | Total Hrs. |
| | TOTAL HOURS WORKED TOTAL AMOUNT OF PAYME | | ORKED | - | - | - | - | - | Α | \$ | - |
| | TRANSPORTATION EXPENS | SES | ī | | | • | • | • | l | | |
| | AIR FARE (Note 1) | | | | | | | | | | |
| | RENTAL CAR (Note 2) RENTAL CAR GAS | | | | | | | | | | |
| 14. | PARKING | | | | | | | | | | |
| | TAXI/SHUTTLE/BUS | | | | | | | | | | |
| | TOLLS OTHER TRANSPORT * | | | | | + | | | | | |
| | PERS. CAR MILES/COST * | | | | | | | | | | |
| | TOTAL (1118) | - | - | - | - | - | - | - | В | \$ | - |
| | LODGING EXPENSES | | • | | | • | • | • | | | |
| 20. | LODGING (Actual) | | | | | | | | | | |
| | PER DIEM - LODGING | | | | | | | | | | |
| | LODGING TAX (Note 3) | _ | _ | _ | _ | _ | _ | _ | С | \$ | |
| 200 | Lesser of (20 or 20a) + 20b MEALS & INCIDENTAL EXP | - FNSES (75% OF | PER DIEM FOR | FIRST & I AST | - DAV) | | | | Ë | Ψ | |
| 21 | BREAKFAST - ACTUAL | LINGES (75 % OI | I EN DIEM I OI | THIST & LAST | DA1) | | | | l | | |
| | LUNCH - ACTUAL | | | | | † | <u> </u> | <u> </u> | | | |
| | DINNER - ACTUAL | | | | | | | | | | |
| 24. | TIPS | | | | | | | | | | |
| | OTHER INCIDENTALS * | | | | | | | | | | |
| | TOTAL (2125) PER DIEM - Meals/Incidentals | | - | - | - | - | - | • | l | | |
| | LESSER OF 26 OR 27 | - | - | - | - | - | - | - | D | \$ | - |
| | OTHER BUSINESS EXPENSES * | Enter Explanation | n on Line 32 | | | | | | | | |
| 29. | | | | | | | | | ĺ | | |
| 30. | TOTAL (2930) | | _ | | _ | | | | E | \$ | |
| | | NI OF TRAVEL A | ND OTHER RUC | INCCC EVENICE | | 1 | - | | | Ψ | _ |
| 32. | *EXPLANATION OF TRAVEL AND OTHER BUSINESS EXPENSES ANALYSIS OF BALANC F. Net Nonemployee Expense | | | | | | | _ | \$ | | |
| | | | | | | (A+B+C+D+E) | | | ŀ | Ψ | |
| | | | | | | ` | Advance/Ticke | ts | İ | | |
| | | | | | | | | | ľ | | |
| | | | | | | H. Nonemployee Expense to be Reimbursed (F minus G) | | | | \$ | |
| | COST DISTRIBUTION | | | | | | I have incurred the above expenses on behalf of Sandi | | | т | atories only |
| | PO LINE NO AMOUNT | | | | | and will not be reimbursed by another company or agency. | | | | , | |
| 33. | 7,000011 | | 1740 | :=: | ORG. NO | <u> </u> | | | | | |
| | | | | | | Nonemployee Sig | | AL APPROVAL | | Date | |
| | | | | | | | . 114. | | | | |
| | | | | | | 1 | | | | | |
| | | | | | | (SDR) Approval Sig | nature (see instruction | ns) | | Org | Mail Stop |
| | I I | | I | | i | | | | | | |