

## **RF Procurement & Travel**

### ***Purchasing***

*The Research Foundation (RF) must ensure that all expenditures comply with sponsor, Research Foundation, and campus guidelines. In accordance with federal requirements, all expenditures must be reasonable, allowable, and allocable to the sponsored project. All RF procurement transactions must be conducted in a manner providing full and open competition. The roles of Purchasing and Accounts Payable (A/P) staff are to assist project staff with the purchase of necessary project items and equipment at the best price possible; establish quality relationships with suppliers that will meet project needs; and procure goods, products, and services to project staff as efficiently as possible. Purchasing and Accounts Payable work in tandem with the Office of Research and Sponsored Programs (ORSP) to ensure funds are available to support these purchases. Click [here](#) for the complete SUNY RF Procurement Policy.*

Discuss and decide on procurement and check for appropriate spending per your grant.

Check for available funding in RF Report Center.

Create a purchase requisition, filling out all required areas (please see attached sample req).

- *Generally speaking, RF procurement will mirror the State procurement procedures and policies as well as thresholds.*
- When necessary to obtain a Quote/Proposal/Estimate, be certain to include with Requisition, and the Bill-To and Ship-To addresses read as:

**Bill-To:**

Research Foundation  
at SUNY Canton  
Accounts Payable -200  
34 Cornell Dr.  
Canton, NY 13617

**Ship-To:**

Research Foundation  
at SUNY Canton  
Receiving  
34 Cornell Dr.  
Canton, NY 13617

- *For P-Card, the ATTN line should read: **VISA/RF/Name***

### ***Purchase Requisitions***

Every time a purchase is needed, the Principal Investigator (P.I.) or Designee must complete a Purchase Requisition form. The following information must be included:

- Req. # - Start with the award number then – 01, 02, 03, etc. An example using the sample Purchase Requisition form is 77777-01.
- Requisition Date
- Supplier name, Address, Website, Phone Number, and Email (if available)
- Name of person for deliverables and/or inquiries
- PATEO
- Requisitioner and extension

- Type (i.e., GNS, EQP, SUP, etc.) and Category
- Item – Should be attached (i.e., a prepared Quote or Estimate)
- Quantity, Unit, Unit Price, Total

Included is a sample Purchase Requisition that you can use as a guide. Once the requisition is completed, the P.I. needs to sign.

The following are expenditure types:

- SUP = if ordering materials that come to less than \$10,000
- EQP = if ordering materials that come to more than \$10,000
- GNS = general
- FPS = stipends
- RCH = recharges, i.e., telephone bill, postage
- TRV = travel, which will be used on the Travel Payment Request form

***Steps for completing and obtaining approvals for a purchase requisition:***

Starting with the requesting department/grant, the completed purchase requisition must obtain all signatures, in the following order:

1. The Principal Investigator (P.I.) of the grant funding the expense
  - a. Email the signed requisition to [Grants@canton.edu](mailto:Grants@canton.edu)
    - i. Grants office will review and may ask questions
2. The Grants Director (*In absence of Grants Director, the Research Administrator may sign*)
  - a. Email the signed requisition to the Operations Manager (O.M.) for final review and signature approval.
3. The Operations Manager (O.M.)
  - a. Email the signed requisition to [Purchasing@canton.edu](mailto:Purchasing@canton.edu), [Grants@canton.edu](mailto:Grants@canton.edu), and the P.I. for processing by Purchasing and Accounts Payable. Notification email(s) will be sent in accordance with the type of requisition and include any further instructions or action(s) necessary.

Approved requisition will then be ordered/paid via:

1. A/P for payment/vouchering as a confirming order.
  - a. *This is sometimes frowned upon as a confirming order implies something has been ordered without prior approval.*
  - b. *Exceptions to this guideline would be extenuating circumstances where a verbal or email approval was given by Grants Director and O.M.; Proper signatures MUST ultimately be gained.*
2. Ordered/Purchased with an RF P-Card.
3. Turned into a Purchase Order, coordinated with vendor, and processed once the order is received/complete and invoiced to A/P.

Ordering, Receiving, and Payment responsibility will be with *Procurement, Accounts Payable,* and *Receiving Departments*\*.

-Procurement/ A/P will maintain printed copies of, and review for:

- ✓ Requisition
- ✓ Order Confirmation/Invoice
- ✓ Receiving Copy/Packing Slip indicating items rec'd, dated, initialed

-\*Further responsibility will be shared with the Grant for P-Card specific purchases:

- ✓ BoA Statements MUST be emailed to Purchasing@canton.edu in a timely fashion, but no later than the 14<sup>th</sup> of the month which the statement was made available.
- ✓ BoA Statements MUST be annotated with the requisition # clearly labeled next to each listed expense.
- ✓ Any outstanding discrepancies MUST be resolved as efficiently as possible, with full transparency given to the ORSP and Purchasing/Accounts Payable.

Req. #

55555-01

Use Award Number  
and start with 01

Requisition Date

10/7/2024

# Purchase Requisition

Supplier Amazon

Address [www.amazon.com](http://www.amazon.com)

City Enter city if available

State if available

Zip Code if available

Social Sec # or Fed ID # \_\_\_\_\_

Phone # if available

Fax # \_\_\_\_\_

<b>Ship to Address</b>	Payment Terms: _____	<b>5555555</b>	<b>1</b>	<b>55555</b>
SUNY Canton, 34 Cornell Drive, Canton, NY 13617	Freight   __ Due         __ Paid	<b>Project</b>	<b>Task</b>	<b>Award</b>
Organization Name (Department)	Carrier _____	<b>SUP</b>		
<b>MAC 616</b>	FOB   __ Destination   __ FCA   __ Origin	Expenditure Type		
Building                  Room Number	Supplier Notes:	<b>360-VP Academic Affairs</b>		
Attention		Organization Name (Department)		
<b>Becky Blackmon</b>		Requisitioner	Telephone #	
Need by Date: _____		Authorized Signature	Date	
	Confirming (Yes/No) _____			

[illegible]

## **Travel**

Discuss and decide on travel and check for necessity, reasonableness, and appropriate spending per your grant. Click [here](#) for the complete RF Travel Handbook.

- Travelers are expected to travel by the method most conducive to achieving the objectives of the trip while balancing cost, time, and safety.
- Check for available funding in RF Report Center.

Create RF Request to Travel requisition, filling out all required areas (see attached sample req), complete with appropriate signatures.

- *Generally speaking, RF travel will mirror the State travel procedures and policies as well as thresholds.*

### **General Guidelines for RF Travel:**

- *If your trip is **out of state**, you must have your Request to Travel req and Travel Final Expense req signed by the traveler's area VP.*
- *If your trip involves the traveler using a **state vehicle**, it is their responsibility to check for availability prior to submitting the Request to Travel req.*
- *When everything is approved [statecar@canton.edu](mailto:statecar@canton.edu) will be emailed the approved form if state vehicle is marked on the request form.*
- *If **airfare** is required, mirroring the state we recommend you go through:*
  - **Child Travel New York** PS66730  
d/b/a Child Travel, A direct Travel Company  
30 Corporate Drive  
Clifton Park, NY 12065  
1-800-774-0655  
(You will get an automated message that says press option 1 for higher education travel, press option 2 for official NYS business travel. **SUNY staff should press option 1.**) (518) 292-9020  
email: [highered@dt.com](mailto:highered@dt.com)  
[www.concursolutions.com](http://www.concursolutions.com)  
After Hours Emergency Assistance: 800-774-0655, Option B When booking airfare, you will be asked for a five digit code. Our agency code is 28360.
  - *In compliance with the Fly America Act, all travel on federally funded projects must be on a U.S. flag air carrier.*
  - *Airfare must be refundable*
- *For **lodging** check the per diem rate available online, – <https://www.qsa.gov/travel/plan-book/per-diem-rates>*
- *If your lodging is more than the allowed rate, please complete and send a 'Lodging Justification' form (<https://www.canton.edu/grants/travel.html>) and send with your*

*Request to Travel req for signatures and approval. This MUST be done prior to your trip to ensure expenses will be covered.*

- *Be sure to bring a **tax-exempt** ST-129 form with you to ensure no tax is charged for lodging.*
- *Please keep in mind all **meal reimbursements** NOT associated with overnight travel are considered taxable by the IRS and will show on your W-2.*
- *There is no “travel” card for RF, just your regular P-Card.*
- *IF a cash advance is required, a check will be issued and must be picked-up/signed-out from A/P, no sooner than 2 days prior to start of trip. Amounts >\$400 require justification/list of student participants if applicable.*
- ***NO PURCHASING OF:*** *Alcoholic beverages, Incidentals on hotel bill (gym/spa charges, and movie rentals), Personal use of any kind.*

### ***Travel Requisitions***

Every time traveling is necessary, the P.I. or designee needs to complete a RF Request to Travel req before the trip, and a Travel Final Expense req after the trip. The following information needs to be included on the requisitions:

- Req. # - Start with the award number then – 01, 02, 03, etc., ending with the letter “T”. An example using the sample Purchase Requisition form is: award #-01T.
- PATEO
- Date
- Name
- Home Address
- Point of Departure, Date, Time
- Point of Arrival, Date, Time
- Destination and Purpose of Travel
- Relationship to Program (what type of employee are you)
- Pre-Trip/Request to Travel:
  - Transportation estimate
  - Meal(s) estimate
  - Lodging estimate
  - Total Encumbrance
  - Appropriate signatures
- Post-Trip/Travel Final Expense:
  - Transportation actual \$
  - Meal(s) actual \$
  - Lodging actual \$
  - Other Travel/Miscellaneous actual \$
  - Appropriate signatures

***Steps for completing and obtaining approvals for RF Request to Travel:***

Starting with the requesting department/grant, the completed travel requisition must obtain all signatures, in the following order:

1. The Traveler, and (P.I.) of the grant funding the trip
  - a. Area VP for **OUT OF STATE TRAVEL ONLY**
  - b. Emailed the signed requisition to [Grants@canton.edu](mailto:Grants@canton.edu)
    - i. Grants office will review and may ask questions
2. The Grants Director (*In absence of Grants Director, the Research Administrator may sign*)
  - a. Email the signed requisition to the Operations Manager (O.M.) for final review and signature approval.
3. The Operations Manager (O.M.)
  - a. Email the signed requisition to [Purchasing@canton.edu](mailto:Purchasing@canton.edu), [Grants@canton.edu](mailto:Grants@canton.edu), and the P.I.. If an advance is required, the form will then go to A/P for further processing. Notification email(s) will be sent and include any further instructions or action(s) necessary.

# RF REQUEST TO TRAVEL FORM

Please allow at least **Three weeks** for processing of Travel

DATE

October 7, 2024

Req. No:

55555-01T

For Reimbursement of travel expenses, travel voucher and receipts must be submitted to the RF Procurement Office within 30 days of returning.

Request confirmed & initialed by Physical Plant Staff

**TRAVELER** Rudy Roo **Phone #** -5555

Forward completed form directly to Physical Plant - DO NOT use separate form for vehicle reservations. Physical Plant staff will forward Travel Request Form to the RF Travel Office at SUNY Canton after scheduling and confirming vehicle registration.

**DESTINATION:** New York City

**PURPOSE OF TRIP (Attach Documentation)**

Departure date & time.

Conference

☒ Yes

Car 0.45 12 pass. van 0.55  
Mini van 0.45 With others

**DEPARTURE:** Date: 7/1/2024 Time: 8:00 a.m.

Lens Approved (license on file)

No

Yes

**RETURN:** Date: 7/2/2024 Time: 7:00 p.m.

Rental Car

E-Z Pass

No

Yes

**State Vehicle ONLY. NOT claiming additional expenses.**

Personal car- record estimated miles below

**ESTIMATED EXPENSES:**

List Estimated \$ Amounts

\*Lodging

No ☐

Yes ☒

Prepaid on RF P-Card

I choose to be reimbursed later

Confirmation #

# Nights

1

at (rate)

\$ 220.00

Hotel information:

Hotel Name: Holiday Inn New York City

Address: 585 8th Avenue

City/State: New York, NY

Fed. I.D.:

Tax Exempt certificate ST-129

Zip Code 10018

\$ 220.00

\*Meals

No ☐

Yes ☐

Reimburse per diem

Per Diem Rate

# Breakfast

# Dinner

Paying with RF P-Card

\$79.00

2

at

\$16.00

2

at

\$63.00

\$0.00

at

\$0.00

at

\$0.00

\$ 158.00

\*Registration/Conference Fee(s)

Registration Fee information:

Payee: NY Conference Registration

Fed. I.D.: XXXXXXXXX

Address: 414 8th Avenue

City/State: New York, NY

Pre-registered with RF P-card on RF Award

Please register me & pay fee by check

Reg. Fee Amount: \$ 90.00

Zip Code 10018

\$ 90.00

\*Personal Car Mileage

Estimated mileage

at rate

\$ 0.670

\*1/1/24 - 12/31/24

\$ -

**State Vehicle Mileage - Physical Plant approval required.**

Destination of State Vehicle

252

estimated miles

\$ 0.450

\$ 113.40

Airfare

I have pre-paid with RF P-Card

398.11

\$ 398.11

\*Other

Parking	\$25.00	Tolls	\$10.00	Taxi	\$50.00		\$0.00	\$ 85.00
Baggage	\$50.00	Internet	\$0.00	Taxes	\$0.00		\$0.00	\$ 50.00

**P.I. : Check here if a CASH ADVANCE is required. Cash advance will be 80% of estimated expences**

PATEO

5555555

1

55555

PATEO

TOTAL:

\$ 1,114.51

I Certify: This travel is for RF business. I have read the vehicle policy and accept all driver responsibilities as stated in that policy. I authorize office of Physical Plant to verify my Driver's License information utilizing the DMV Lens program to determine my eligibility to drive a college owned/leased vehicle.

**SIGNATURES:**

**SIGNATURE INSTRUCTIONS:**

Traveler/ Driver:

All travelers must sign

P.I.

Grants Office

Operations Manager

Area V.P.

Only for out of state travel

Revised 1/24

# RF TRAVEL FINAL EXPENSE FORM

					55555-01T	
Originating Agency <b>SUNY Canton</b>		Originating Agency Code <b>360</b>		Interest Eligible (Y/N) <b>N</b>		Liability Date (mm/dd/yy)
Official Station <b>SUNY Canton</b>		IRS Code			Payee Amount \$158.00	
		Normal work Hours <b>8-4</b>		Work Phone # <b>5555</b>		Merch / Inv. Rec'd Date
Payee Name (Last) <b>Roo</b>		(First-Full) <b>Roody</b>		(MI) <b></b>		Suffix <b></b>
Home Address <b>34 Cornell Drive</b>		Departure Date <b>07/01/24</b>		Time <b>8:00</b>		<input checked="" type="checkbox"/> AM <input type="checkbox"/> PM
City <b>Canton</b>		State <b>NY</b>	Zip Code <b>13617</b>	Return Date <b>07/02/24</b>		Time <b>7:00</b>
						<input type="checkbox"/> AM <input checked="" type="checkbox"/> PM
Purpose of Travel <b>Conference</b>						
<b>Transportation:</b> Common Carrier Expenses					<b>On RF P-Card</b>	
					<b>Traveler Due Reimbursement</b>	
Airfare					\$398.11	
Train or Bus					\$0.00	
<b>Vehicle Rental</b>					\$0.00	
<b>Fuel</b> (When taking a State Vehicle use the Gas Card in the vehicle)					\$34.81	
(Whole numbers only) <b>0</b> miles @ <b>**</b> <b>\$0.670</b> per mile <b>*1/1/24 - 12/31/24</b>					\$0.00	
<b>Lodging:</b>						
		1		\$220.00		State Rate
				\$0.00		State Rate
				\$0.00		Other Than State Rate
Per Diem Rate:		\$79.00		2		16.00 + 2
Per Diem Rate:		\$0.00		0.00		Dinners @
						63.00
						\$158.00
						0.00
						\$0.00
						\$0.00
						\$0.00
<b>Incidental Expenses:</b>						
Parking	\$ 50.00		\$ 8.95			\$58.95
Taxi	\$ 26.69	Shuttle	\$ -	Incidental Expenses should be charged on the		\$0.00
Internet	\$ -		\$ -	RF P-card card whenever possible!		\$26.69
Baggage	\$ 50.00	Out of state tax	\$ -			\$50.00
Other:					\$0.00	\$0.00
<b>Registration/Conference Fees:</b>					\$90.00	
<b>PAYEE'S CERTIFICATION</b>					<b>Total RF P-Card Charges</b>	
					<b>Total Reimbursement Due to Traveler</b>	
I hereby certify that the above account and attached schedules are just, true and correct, that no part thereof has been paid, except as stated therein, and that the balance therein stated is actually due and owing, and that the amounts claimed were necessary and incurred in the performance of my official duties.					<b>\$878.56</b>	
					<b>\$158.00</b>	
					<b>OR</b>	
					<b>Traveler's Total Trip Allowance</b>	
<b>SUPERVISOR'S CERTIFICATION</b>					<b>Total Amount Due from Traveler Attach personal check payable to Research Foundation</b>	
					<b>\$0.00</b>	
					<b>Operations Manager</b>	
					<b>Date</b>	
Grant Office Signature      Date					Area VP's Signature (Out of State Travel)      Date	
PTA					PTA	
Exp. Type					Exp. Type	
Organization					Organization	
					Revised 1/24	