

Office of Scientific Quality Review Expense Reimbursement Policy

Persons traveling on authorized and necessary USDA business are entitled to reimbursement of related expenses. An Expense Reimbursement Request form is to be submitted for reporting expenses to be reimbursed by USDA funds. Copies of the form are available from the OSQR office by emailing OSQR@USDA.GOV.

The following guidelines are applicable to OSQR travel:

1. The USDA policy pays for Air fare (Government contract Airline City Pair air fares).
2. All panelists and panel chairs must make flight arrangements through BCD TRAVEL OSQR's contracted travel agency. DO NOT purchase your tickets through any other means (on-line, another travel agency or directly from the airlines). All OSQR air travel must be through BCD TRAVEL
3. Your air tickets will be directly billed to OSQR, so you will not need to pay for them. If you purchase tickets by other means you risk not being reimbursed for the cost of your travel. Tickets obtained through BCD TRAVEL are unrestricted and refundable should plans change or emergencies arise. USDA travel regulations prohibit the use of non-refundable fares.
4. Baltimore Washington International/Thurgood Marshall Airport (BWI) is the most convenient airport. BCD Travel may, however use Dulles or Reagan National if savings are significant.
5. Once your airline reservations have been made, your ticket is confirmed, and BCD Travel will e-mail you a flight itinerary. Please forward all e-mails that you receive from BCD Travel to OSQR@usda.gov. Ground transportation costs (taxis, shuttles, etc.) are also reimbursed.
6. Personal mileage on privately-owned cars will be reimbursed at the rate of \$.58(January 1, 2019 to present). Car rental is applicable only if pre-approved by OSQR.
7. Rooms at the assigned hotel are charged to the traveler and will be reimbursed on a cost-basis.
8. Personal entertainment and incidentals, such as a movie, are not reimbursable.
9. Receipts are required for any expense in excess of \$25.
10. Forms should be submitted to the OSQR Office within two weeks of the date the expenses are incurred or, for travel, within two weeks of completion of the trip.
11. OSQR will reimburse for meals with a per diem amount allowed for locality.

PLEASE RETURN COMPLETED FORM AND RECEIPTS TO:

U.S. Department of Agriculture, A.R.S., Office of Scientific Quality Review
5601 Sunnyside Avenue, Building 2 Room 1124; Mail stop 5142, Beltsville, MD 20705-5142
(Voice) 301-504-3282; (Fax) 301-504-1251 or (Email) OSQR@usda.gov

Public Burden Statement: According to the Paperwork Reduction Act of 1995, an Agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB number. The valid OMB control number for this information collection is 0518-0028. The time required to complete this information collection is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

**United States Department of Agriculture, Agricultural Research Service, Office of Scientific
Quality Review
5601 Sunnyside Avenue, Beltsville, Maryland 20705
301-504-3282**

Office of Scientific Quality Review
Expenses Reimbursement Request

Period Covered: From: _____ 20____
 _____ To: _____ 20____

Travel Authorized By: _____

Name: _____
 Organization: _____
 Address: _____
 City: _____
 State: _____ Zip: _____
 Tel: (_____) _____

PURPOSE OF EXPENSE (Panel Review, Etc.)	ROUTE COVERED			MODE OF TRAVEL*
	Date	From	To	

DATE	TRAVEL	LODGING	MEALS			MISCELLANEOUS			TOTALS
			BREAK	LUNCH	DINNER	CAB	TEL	TIPS	
									\$0.00
									\$0.00
									\$0.00
									\$0.00
									\$0.00
									\$0.00
									\$0.00
									\$0.00
Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

DATE		AMOUNT
		\$0.00

ACCOUNTING	
CHARGE \$	TO LINE ITEM
CHARGE \$	TO LINE ITEM
CHARGE \$	TO LINE ITEM
CHARGE \$	TO LINE ITEM
EXTENSIONS AND TOTALS CHECKED	POLICY CHECKED
INITIALS	INITIALS

REIMBURSEMENT SUMMARY	
TOTAL EXPENSES	\$0.00
LESS: ITEMS PAID BY OR CHARGED TO OSQR	()
REIMBURSEMENT DUE	\$0.00

I hereby certify that the above expenses were incurred by me in connection with travel on OSQR business and that I have not been, nor do I expect to be, reimbursed from another source for any portion of the net amount claimed from OSQR.

SIGNED: _____ DATE: _____ APPROVED: _____ DATE: _____

*If personal car, indicate mileage, reimbursed at \$.58.