

CGAuxA-4 (1-08)

COAST GUARD AUXILIARY ASSOCIATION, INC.
CLAIM FOR REIMBURSEMENT - NON-TRAVEL FORM

NAME _____ AUXILIARY OFFICE _____
ADDRESS _____ BUDGET ACCOUNT _____
CITY _____ ST _____ ZIP _____
EMAIL _____ PHONE _____

Check here if **NOT** a grant associated expense. If expense **WAS** incurred in conjunction with a grant, enter:

Grant Name: _____ **Grant Number:** _____

EXPENSES CLAIMED

EXPENSE TYPE:	Claimant paid out-of-pocket
1. FAX	\$ _____
2. Telephone	\$ _____
3. Email	\$ _____
4. Supplies / Printing	\$ _____
5. Other _____	\$ _____
6. Other _____	\$ _____
7. Other _____	\$ _____
8. Other _____	\$ _____
9. Total:	\$ _____
10. Reimbursement due claimant:	\$ _____

COMMENTS

AUXCEN USE ONLY

SIGNATURE OF CLAIMANT

This statement and all items attached are true. I am aware that this claim for reimbursement must be completed and forwarded within seven (7) days after the expense was incurred in accordance with the instructions on page 2 of this form.

Member signature _____ Date _____

approved Department Chief _____ Date _____

approved NADCO _____ Date _____

approved (NACO/NAVCO) _____ Date _____

NON-TRAVEL EXPENSE APPROVED

Authorized signature _____



E-MAIL SUBMISSION - Authorized and preferred for all travelers with electronic completion capabilities even if they do not have the ability to electronically sign the form.

Required Software:

The software required to complete this form is a full version of Adobe Acrobat 5.0 or above, or, Acrobat Approval.

Electronic document completion and flow:

First Step:

The form is initiated by the member incurring the non-travel expense. The member shall complete the personal information section, the grant section if the expense is chargeable to a grant, and the Expenses Claimed section by entering the expenses claimed in items 1-8 as appropriate. The expenses claimed on the appropriate lines for items 1-8 are for official expenses that you paid with your personal funds and/or personal credit card. Expenses claimed in items 5-8 require a brief explanation in the space provided on that line of the form. You may also use the "Comments" block if additional space is required. If you have electronic copies of receipts you may attach them to the form by selecting the ATTACHMENTS button on the left side of the electronic AuxA-4 form, click add then select the documents using the browser. Once the documents are attached, close the attachment section then proceed to signing the form. Insert your electronic signature in the Signature block of the form. Immediately following the signing step a dialogue box will appear with an area to enter your individual password and the ability to "save" or "save as". The correct selection is "SAVE AS" which will allow you to specify a new file name. Name the file in a manner that identifies the file to you such as "DC-E-PhoneExpense.pdf", "N-A-PrinterSupplies.pdf", etc. Selecting "save" option will generate an error; the original AuxA-3 form should be write-protected on your system. If not then you will require a fresh copy for each form you complete from the FORMS page on the cgaux.org website. If you cannot electronically sign the form then click on FILE at the top of the electronic document and "SAVE AS" described above without a signature. Attach the "SAVED AS" document to an e-mail message then send through your chain of responsibility to your Department Chief. Any receipts/supporting documents not electronically attached to the form should be sent by fax with a copy of the claim to AUXCEN at (314) 962-6804. Contact DVC-IF at dvc-if@cgaux.org for assistance if you have difficulties in electronically forwarding the form. Once the document is electronically signed the ability to "RESET" the form is removed from all subsequent actions; the "RESET" box will disappear. Any changes must be made before signing the form. NOTE: AUXCEN travel section cannot process any claims without the required receipts.

Second Step:

The Department Chief shall review the reimbursement request to ensure it is an authorized expense in accordance with their approved budget. If the funding is from the department's budget then the Department Chief electronically signs the form and forwards it via e-mail to auxatvl@sbcglobal.net for processing by the AUXCEN. If the expense is not against the department's budget then the DC electronically signs the form and forwards it to the appropriate NADCO for review and/or approval then submission to the AUXCEN. If the expense is not within the NADCO's budget authority the claim is then forwarded to NAVCO for funding approval. After conferring with NACO, the NAVCO forwards approved claims to AUXCEN for payment process.

AUXCEN travel section will complete the approved claim, save and forward the form to the Executive Director for final payment approval. The Executive Director verifies all entries and receipts for completeness. If not complete the member will be notified and the claim held pending receipt of missing information. Upon approval, the Executive Director electronically signs the form then schedules check issuance to the claimant. A printed copy of the claim will be sent to the claimant with the check. A hard copy of the form and all supporting receipts/documents will be printed and retained at the AUXCEN for official records and auditing purposes.

MANUAL COMPLETION: Note: This form may be filled-in on your computer and printed using the free Acrobat Reader software or you may print a blank copy to complete by hand or typewriter. Follow the steps above with regard to entering the required data on the form by the member. Sign the form then attach all required receipts and submit them by fax or by mail to the DC via the chain of responsibility. Those within the chain of responsibility shall follow the same process for approvals as specified above for electronic submission except a hard copy of the form and receipts shall be forwarded by the available means.