# Consecutive Overseas Tour (COT) & In-Place COT (IPCOT) - Military Relocation Agreement Travel (RAT) - Civilian Voucher processing

Manual Submission guide to COT/IPCOT/RAT
Submit all required documents to the 86CPTS.CS@US.AF.MIL org box

## **Required Documents**

- Checklist (compelete the approriate checklist, only fill out the top portion for customers)
- 1351-2, Travel Voucher (must be MAY 2011 form, previous editions not accepted)
- 1351-2C, Travel Voucher Continuation Sheet (if your itinerary will not fit in block 15)
- COT/IPCOT/RAT Orders (front and backside)
- PCS Orders (front and backside)
- SATO/CTO Airfare Itinerary Receipt
- Receipts for expenses over \$75 dollars
- IBA Statement
- GTC Statement (optional -- preferred to pay out actual cost of expenses that were paid in foreign currency)
- Lost Receipt Form (if provided receipts are not sufficient or available)
- Direct Deposit Form [civilians only]
- WTA Form [civilians only]

	Active Duty PDT Entitlements (PDT, PPM, TLE, Dep Tvl, etc.) Checklist			
	FOR MILITARY ONLY CUSTOMER USE			
	Traveler's Name:			
	Traveler's SSN: Order #:	YES	NO	N/A
1	<b>DATA MASKED</b> Information-Does voucher or supporting documents contain data masked (classified) information? Was any portion of your travel to/from a data masked (classified) location?			
2	Is your personal information correct and legible? (Name, grade, SSN, mailing address, <u>email address</u> and phone number)			
3	Does the travel order number on the voucher match the travel order number filed with the voucher?			
	Is itinerary correct and legible to include verification of dates traveled, places, modes of travel, reasons for stops, lodging costs and POC/Terminal mileages (if applicable)?			
5	Split disbursements are mandatory for Government Travel Card (GTC) holders. Is split disbursement amount identified?			
6	Are previous advances claimed on the DD Form 1351-2 (Annotated in Block 9)?			
7	Are your dependents listed on DD Form 1351-2 and is the accompanied or unaccompanied block checked? Does this information match your orders?			
8	Did you check Block 16, POC Travel? Check appropriate block (Owner/Operator or Passenger)			
9	Are all <u>expenses claimed</u> and <u>required receipts</u> attached to include itemized lodging and any expense \$75.00 or more? Use DD Form 1351-2C for additional expenses. If you are missing receipts for any expense claimed, use a local "missing receipt form" (obtained from The Finance Office).			
	Are Non-Availability Statements or Contract Quarters Authorization numbers attached for off-base lodging not authorized in orders? (if applicable)			
11	If you shipped a vehicle at government expense, is DD Form 788 (front and back) with appropriate signatures attached?			
	For Personally Procured Moves (PPM), did you attach TMO required worksheets?			
	Are you claiming expenses not authorized in your orders? Did the approving official print name, sign, list telephone number, date DD Form 1351-2 in Block 21a? Did they specify what reimbursable expense(s) they're approving and annotate on the DD Form 1351-2 in Block 29? (MANDATORY, if you claim expenses not authorized in orders)			
14	Are copies of travel orders attached to include amendments? NOTE: Front and back of orders (if applicable) are required.			
	If TDY enroute and leave was taken, Is any period(s) of leave taken while at the TDY enroute location annotated on the voucher to prevent the payment of Per Diem while on leave? Is the leave form(s) approved by the TDY Commander attached?			
16	Did you sign and date the DD Form 1351-2? (MANDATORY)			
	If this is your first Permanent Duty Travel (PDT), ensure you establish your travel payment account information by completing SF 1199A or FMS 2231. NOTE: You cannot be reimbursed for travel expenses until this information is provided.			
	For TDY enroute only:  1) If locations listed are not on orders, are amendments attached or variations authorized?  2) If TDY was LESS THAN 12 hours, did you claim actual meal cost in reimbursable expenses?			
	Did you complete the PDT arrival worksheet and included it with your voucher?			
20	Traveler's signature: Date:			

- \* ONLY ONE COPY OF THE TRAVEL VOUCHER, ORDERS AND RECEIPTS ARE REQUIRED WITH THIS CHECKLIST
- \* TO BE CONSIDERED A VALID RECEIPT IT MUST SHOW THE COMPANY NAME, DATE SERVICES WERE PROVIDED, UNIT PRICE OF ITEM/SERVICE, AMOUNT "PAID" AND "AMOUNT DUE" OF \$0.00 OR EVIDENCE OF PAYMENT
- \* IT IS YOUR RESPONSIBILITY TO RETAIN A COPY OF THE TRAVEL VOUCHER, ORDERS, AND RECEIPTS. THE FINANCE OFFICE WILL DESTROY SUBMITTED COPIES AFTER 90 DAYS.

FINANCE USE ONLY											
1	<b>DATA MASKED</b> Information-Does voucher or supporting documents contain data masked (classified) information that needs to be submitted on an AF Form 32? (refer to AFFSC- Base Level Business Rules) If so, remove classified data, complete AF Form 32 and submit via FM Workflow/RAD.										
2	Verification check - has the customer completed requirements listed above? Are all <u>expenses claimed</u> and <u>required receipts</u> attached to include itemized lodging and any expense \$75.00 or more? If not, <u>RETURN VOUCHER TO CUSTOMER</u>										
3	Is the voucher date stamped?										
4	Split Disbursements are mandatory for GTC holders. Is split disbursement amount identified?										
5	Is the member's banking account information built in RTS? If not, attach SF 1199A or FMS 2231.										
	Is the PDT arrival worksheet attached and dates verified against itinerary? Has member provided current mailing address for their W-2 and a valid email address for payment/debt notification?  For Ret/Sep final vouchers, have DJMS, RTS and DTS been checked for outstanding debts? Ref: AFMAN 65-116V1, Para 69.14.3. If										
	debts are found document them and include in the voucher submission to AFFSC with a screen shot from DJMS showing outstanding debt amount. The remaining debt will be collected from any amounts due the member for transportation of dependents, shipment of personal property, and separation travel (officers only).										
8	Are orders properly certified and the line of accounting legible?										
9	Are copies of the travel orders attached (to include amendments)? NOTE: Front and back page of orders are required.										
10	For TDY enroute only:  1) Are meal statements on all orders validated for accuracy to ensure computation of correct daily per diem? Are CED order meal statements circled or underlined?  2) If member is entitled to FSA (for TDY over 30 days), advise member to submit a DD Form 1561 with the voucher and provide the location of dependents.  3) Are FSR and PSR apportated and legible?										
11	Checklist completed by (Printed Name): Date:										
12	Checklist audited by (Printed Name): Date:										

	CIV PDT Renewal Agreement Travel Checklist											
	CUSTOMER USE											
	Traveler's Name: SSN:											
	Does the travel itinerary or any documents submitted on your behalf contain CLASSIFIED INFORMATION? If so, the FSO must complete an AF Form 32 for classifed travel reimbursement.											
2	Is your personal information correct and legible? (Name, Grade, SSN, mailing address, email address and phone number)											
3	Does the travel order number on the voucher match the travel order number filed with the voucher?											
	Is the itinerary correct and legible to include verification of dates traveled, places, mode of travel, reason for stops, lodging costs and POC/Terminal mileage (if applicable)?  NOTE: If you list locations not on orders, are amendments attached or variations authorized?											
	Did you have a government travel card? If yes, did you identify the dollar amount for the split disbursement in Block 1 of the DD Form 1351-2? (GTC split disbursments are <b>MANDATORY</b> )											
6	Are previous advances claimed on the DD Form 1351-2 (Annotated in Block 9)?											
	Did you specify if the travel was unaccompanied or accompanied? If accompanied, did you list all dependents who traveled concurrently?											
8	Did you check Block 17 (duration of travel) on DD Form 1351-2?											
9	Are all <u>expenses claimed</u> and <u>required receipts</u> attached to include itemized lodging and any expense \$75.00 or more? Use DD Form 1351-2C for additional expenses. If you are missing receipts for any expense claimed, use a local "missing receipt form" (obtained from The Finance Office).											
10	Did you claim all expenses in Block 18 of DD Form 1351-2? If not, you will not be reimbursed solely on receipts, it has to be claimed?											
11	Did you indicate your retirement code (FERS/CSRS)?											
12	Did you claim a state of legal residence for tax purposes?											
13	Are copies of travel orders attached to include amendments? NOTE: Front and back of orders (if applicable) are required.											
14	Did you sign and date the DD Form 1351-2? (MANDATORY)											
15	Is this the first time you have submitted a voucher for reimbursement outside of the Defense Travel System (DTS)? If so, a completed SF 1199A or FMS 2231 is required.											
16	Traveler's signature:  Date:											

- ONLY ONE COPY OF THE TRAVEL VOUCHER, ORDERS AND RECEIPTS ARE REQUIRED WITH THIS CHECKLIST
- \* IT IS YOUR RESPONSIBILITY TO RETAIN A COPY OF THE TRAVEL VOUCHER, ORDERS AND RECEIPTS. THE FINANCE OFFICE WILL DESTROY SUBMITTED COPIES AFTER 90 DAYS.

	FINANCE USE ONLY											
1	Does voucher/attachments contain classified information (Data Masked) that needs to be submitted on an AF Form 32? (refer to AFFSC- Base Level Business Rules) If so, remove classifed data, complete AF Form 32 and submit via FM Workflow/RAD.											
2	Verification check - has the customer completed requirements listed above? If not, RETURN VOUCHER TO CUSTOMER											
3	Is the voucher date stamped?											
4	Has employee provided a current address for W-2 and email address (@.mil, hotmail, yahoo, etc) for notification?											
5	Is the employee's banking account information built in RTS? If not, attach SF 1199A or FMS 2231.											
6	Does the employee have a GTC? If yes, has the dollar amount for the split disbursement been indicated?											
7	If employee received a cash advance, is the applicable documentation submitted with this claim?											
8	If voucher is a supplemental claim, is the original RTS voucher summary and original documents included?											
9	Is TR cost provided? (Required if employee traveled to locations other than HOR or for indirect travel)											
10	Are orders properly certified?											
11	Are accounting lines on the orders built in BQ (EEIC 395 TV07, EEIC 395 TV05, EEIC 421SS TV05, EEIC 421 TV05, and EEIC 462 TV05)?											
12	Are FSR and PSR annotated on certified orders (if applicable) and is line of accounting legible?											
13	Are copies of the travel orders attached (to include amendments)? NOTE: Front and back page of orders are required.											
14	Checklist reviewed/finalized by (Printed Name):											
15	Checklist audited by (Printed Name):											

TRAVEL VOUCHER OR SUBVOUCHER						Read Privacy Act Statement, Penalty Statement, and Instructions on back before completing form. Use typewriter, ink, or ball point pen. PRESS HARD. DO NOT use pencil. If more space is needed, continue in remarks.									
1. PAYMENT SPLIT DISBURSEMENT: The Paying Office w							will pay directly to the Government Travel Charge Card (GTCC) contractor the portion of your reimbursement ging, and rental car if you are a civilian employee, unless you elect a different amount. Military personnel are required								
Electronic Fund Transfer (EFT) representing travel charges for transportation, logging, a to designate a payment that equals the total of their outs NOTE: A split disbursement is only necessary.							anding gover	nment trave	el card balance to	the GTCC of	contractor.			ersonnei are required	
	by Check						•		i <i>sed while on</i> lovernment Tra				\$ 0		
2. NAME (Lest,				y amount	or ans ren	3. GRA	and the same of th	4. SSN	overninent Tre	iver onlarge		OF PAYMENT	-	liicabie)	
Doe, John								123-4	5-6789		TD	Y	M	ember/Employee	
6. ADDRESS. a. NUMBER AND STREET D. CITY PSC 2 BOX 12345 APO								c. STATE	-	COLUMN TO SERVICE	PC		-	ther	
The state of the s			EE A VE	APO	AEM	TT		AE	05	012	1000	pendent(s)	DI	-A	
e E-MAIL ADDRESS JASON LEFAVE@US.AF.MIL  7. DAYTIME TELEPHONE NUMBER 8 8. TRAVEL ORDER/AUTHORIZATION							9 PREVIO	US GOVER	RNMENT PAYMI	NTS/	1150 11500	D.O. USE ONI VOUCHER NU			
AREA CODE	80-1234		NUMBER	TA-0	123		ADVAN			-11.134		VOOGILICIA	JANILLE C		
11. ORGANIZAT	TON AND S	TATION					1		0.00		b. SUBVOUCHER NUMBER				
	86 (	CPTS/Ram	istein, Ge	rmany											
12. DEPENDEN		complete as ap			20503			DENTS' AD	DRESS ON RE	CEIPT OF	c. PAID	BY			
X ACCOMP		VOTATO DELOTAR	1.44.00.00	COMPAN	ACCUSED TO SECURE	BIDTH	CONTRACTOR DESCRIPTION		, Kindsbac	h					
a. NAME (La	st, First, Mic	dd le Initial)	b. RELATIO	0.5/1033	BATTARE		german								
Doe, Jane Doe, Buck		1	spou		19940		Somman	, 00002	de .						
Doe, Lily		-	daugh		20010	7.10.0			D GOODS BEE	N SHIPPED?	d COM	PUTATIONS			
Doc, Lity			CLT COLL.		20010	010	X YES		NO (Explain in	Remarks)			nut vou	r RET option	
15. ITINERARY							0. MEANS/	d. REASON	e.	f.		as your St	0.55		
2014	b. PLA	CE (Home, Offi City s	ice, Base, Acti and Country, e	ivity, City a fc.)	nd State,		MODE OF TRAVEL	FOR	LODGING COST	POC MILES	us wen	do your ou	ato of f	costaones.	
03/08 DEP		М ВАҮА, К					PA								
03/08 ARR	FRANK	FURT INTL	AIRPORT,	GERMA	NY			AD		75					
03/08 DEP	A CONTRACTOR	COUNTRY	Charles Day Con Co.				CP								
03/08 ARR		MORE INTL COUNTRY		MA				AD							
03/08 DEP	*********	Appearation of the Con-					CP	AT							
03/08 ARR 03/08 DEP	CONTRACTOR OF THE PARTY OF THE	TA INTL AI COUNTRY		A			PA	AI	-		_				
03/08 ARR	7	CHTREE R		J GA			PA	LV		25					
03/28 DEP		BE LOCATI					PA	LV	1	23					
03/28 ARR	ATLAN	TA INTL AI	RPORT, G	A				AT		25					
03/28 DEP	(CITY+	COUNTRY	/STATE)				CP		1		e. SUM	MARY OF PAY	MENT		
03/28 ARR	BALTIN	ORE INTL	AIRPORT,	MA				AD			(1) Perl	Diem			
03/28 DEP		COUNTRY					CP				(2) Actu	al Expense Allo	wance		
03/29 ARR	7.000.000	FURT INTL		, GERMA	72000	artanan raya		AD			(3) Milea	-			
16. POC TRAVE			OPERATE		PA	SSENGE	R	17. D	URATION OF TH	RAVEL	312	indent Travel			
18. REIMBURSA a. DATE	BLE EXPE	b. NATURE O	E EVDENCE		c. AMO	LINIT	d. ALLOW	ED.	12 HOURS OF	RLESS	(5) DLA (6) Reim	bursable Expe	0000		
03/05	AIRFA		r EXPENSE			00.00	U. ALLOW		MORE THAN	n unune	(7) Total		11505	0.00	
03/05	CTO FI					72.40	-	$\dashv$ _	BUT 24 HOUR		34.14 S. H.			0.00	
03/05	FOREIG	GN CURR	CONV FE	E		44.60		~			(9) Amount Owed			0.00	
								×	MORE THAN	24 HOURS	(10) Amo	unt Due			
								19. G	OVERNMENT/D	EDUCTIBLE	MEALS				
									a DATE	b. NO. C	F MEALS	a DA	TE	b. NO OF MEALS	
								_		-					
								_							
20.a. CLAIMANT	SIGNATU	RE												b DATE	
- Contraction of the		1241												Johnson Company (Aller Steel)	
c. REVIEWER'S			BI.ANK		d. SIGNAT	TURE					e TELEF	PHONE NUMB	ER	1. DATE	
NOT REQUIRED; LEAVE BLANK  21.8. APPROVING OFFICIAL'S PRINTED NAME  b. SIGNATURE										c. TELEF	HONE NUMB	ER	d. DATE		
22. ACCOUNTING CLASSIFICATION											<u> </u>				
22. ACCOONTIN	IG CLASSII	TOATION													
23. COLLECTIO	N DATA														
24. COMPUTED	BY I	26. AUDITED	BY I	26. TRAV	EL ORDER	ı	27. RF	CEIVED (P	ayee Signature a	and Date or C	Check No.)		28. AN	OUNT PAID	
24. COMPUTED BY 25. AUDITED BY 26. TRAVEL ORDER/ AUTHORIZATION POST							RA	7086	reconstruction of the second o				-2000000	en un esta esta esta PAPOSTE	

TRAVEL VOUCHER OR SUBVOUCHER (Continuation Sheet)											2	OF	2	PAGES
	NAME (Last, First, Middle Initial) (Print or type)													
	15. ITINERARY 3. FOR D.O. USE ONLY													
a. DATE		b. PLACE (Home, Office, Base, Activity, City and State; City and Country, etc.)  b. PLACE (MEANS) (MEASON FOR LODGING POC STOP) TRAVEL STOP  c. d. e. t. (DOGING POC STOP)												
03/29	DEP			untry, etc.) IRPORT, GER	MANY	TRAVEL	STOP	COST	MILES					
	ARR			IDSBACH, GE		111	MC		75					
$\overline{}$	DEP	JJA ZOW	DITITY, IXII	(D)DACII, GI	214				y					
$\overline{}$	ARR DEP													
$\overline{}$	ARR													
$\overline{}$	DEP								92					
	ARR DEP													
$\neg$	ARR													
$\overline{}$	DEP													
$\overline{}$	ARR DEP								4					
$\overline{}$	ARR													
	DEP													
_	ARR DEP													
$\overline{}$	ARR													
	DEP													
$\overline{}$	ARR								0.					
$\overline{}$	DEP ARR													
	DEP								7.					
$\overline{}$	ARR													
$\overline{}$	DEP ARR								~					
$\overline{}$	DEP													
$\overline{}$	ARR						2							
$\overline{}$	DEP ARR	ĺ												
		RSABLE EXP	ENSES									197		
a.	DATE			b. NA	TURE OF	EXPENS	E			c. A	MOUNT	d	. ALLO	WED
		3										+		
												1		
		24												
				J. 1820										
19. GOVERNMENT/DEDUCTIBLE MEALS  a. DATE  b. NO. OF MEALS  a. DATE											b. NO	OF M	EΔIS	
		a. DAIL		b. 140. c	JI WILAL	3		a. DAIL			D. NO	, OI WII	LALU	
29. REN	ллон	/e					ć							
ZJ. KEN	VIAN!	A.G												

### 1351-2 - Travel Voucher

Please review each item to verify the accuracy of your voucher. Each numbered item coincides with the numbered blocks of the 1351-2.

1

- Select either EFT or check payment
- To the right, identify the amount to be paid to your GTC (can be \$0.00)

2

• List your name. (last, first, middle initial)

3

List your grade (ex. E-5, O-5, GS-15)

4

• List your complete SSN

5

Check Other

6

- List your PSC address in sections a, b, c, and d (ex. PSC 1 Box 2345 APO AE 12345) \*note\* this is where your check will be mailed if you selected that method of payment
- Section e List your email address so we may contact you and send a payment notification

7

• List your phone number (DSN or commercial)

8

• List your order number (found in block 20 of your orders)

9

• List how much money you have already been paid to complete this travel. If you have not been advanced any money, place 0.00 in this block.

10

- Leave sections a, b, and c blank.
- Section d List your state of legal residence, and retirement code [civilians only]

11

List your current organization and station (ex. 86 AMXS / Ramstein Air Base)

12

- Check which applies; accompanied/unaccompanied
- Column a List the name of your dependent
- Column b List the relationship of your dependent
- Column c List the birth date/marriage of your dependent

13

• List physical address of dependents upon receipt of orders

14

Check "NO" for household goods shipment

15

- Notes
  - o Date the itinerary, including year
  - o All reasons for stop at an entry/exit airport will be AD, between CONUS locations is AT
  - o Include all airports
  - o Mode of travel, from airport to airport, will be CP, if you paid for the tickets yourself
  - o If you cannot fit your itinerary in block 15, please use the attached 1351-2C

## Modes of Travel

# Reasons for Stop

PA = Private automobile AT = Airports (within CONUS)

CA = Commercial automobile (Taxi) AD = Airports used to change countries (to/from)

CP = Commercial Plane LV = Dependent's stop in Germany

TP = Plane tickets purchased by government MC = Final stop on itinerary

16

• If a private automobile was used for any portion of this travel, check whether your dependent was owner, operator, or passenger

17

• Check the appropriate box, depending on the time span of your itinerary

18

- Column a List the date(s) you paid for your expense(s) (GTC statements are helpful)
- Column b List the name(s) of the expense(s) you are claiming
- Column c List the cost of the expense(s) in US dollars (GTC statements are helpful)

19

Leave this block blank

20

- Section a Sign your voucher
- Section b Date your signature
- Sections c, d, e, and f leave blank

### 21 - 28

• Leave these blocks blank