

**STATE PROCUREMENT OFFICE
TRAVEL GUIDELINES & PROCEDURES**

INTRODUCTION

Effective July 1, 2026, these travel guidelines, procedures, and the applicable forms and worksheets shall be used for purposes of Intra-State and Out-of-State travel. Department may impose additional requirements in its departmental travel procedures.

I. PURPOSE

To provide travel guidelines and procedures for Executive Branch Department (excluding DOE, UH, OHA, and HHSC) employees in accordance with collective bargaining agreements (BU 2, 3, 4, 9 and 13), Hawaii Administrative Rules (HAR 3-10) and procurement circulars.

II. DEFINITIONS

- A. **Federal Allowable Rate** – The maximum allowable rates for per diem (lodging and M&IE) set by the General Services Administration (GSA) for the 48 Contiguous United States and the District of Columbia (**CONUS**), and by the Department of Defense (DOD) for Outside Contiguous United States, Non-Foreign Overseas and Foreign (**OCONUS**) travel.
- B. **Hawaii Government Employees Association (HGEA) Settlement Agreement** (for BUs 2,3,4, 9 & 13) – Summary agreement dictating how travel time is calculated, regarding work-related travel outside of working hours for those employees, on same-day travel, who may earn overtime pay.
- C. **Incidental Expenses** – Necessary costs incurred while on official business, including but not limited to fees and tips for baggage carriers, porters, hotel maids, transportation drivers, and laundry.
- D. **Intra-State Travel** – Authorized travel within the State of Hawaii, which includes inter-island travel (one-day travel or overnight travel). Note: Hawaii is considered OCONUS.
- E. **Lodging** – Allowable expenditure to cover lodging/hotel costs of intra-state and out-of-state travel where lodging costs are necessary and reasonable.
- F. **Meals & Incidental Expenses (M&IE)** – The maximum amount authorized for daily meals and incidental expenses determined by the business destination set by the GSA for CONUS travel and the Department of Defense for OCONUS travel.
- G. **Out-of-State Travel** – Authorized travel outside the State of Hawaii to the United States and its territories and foreign localities.
- H. **Per Diem** – Allowance for lodging, meals and related incidental expenses. A maximum specified amount for each day of authorized intra-state or out-of-state travel, established by collective bargaining agreements, aligned with the federal rates.
- I. **Statement of Completed Travel** – This form is utilized to record incurred expenses following the traveler’s return.
- J. **Travel Approval Form (TAF), SPO-030** – Form used to document travel details, projected expenses, and obtain written approval by designated authority.
- K. **Travel Worksheets** – Forms (SPO-030A, SPO-030B, SPO-030C, SPO-030D) used to do document airfare, lodging, M&IE, and ground transportation, itineraries and related expenses.

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III. APPLICABILITY

- A. Applies to all persons employed by the State, and to all persons representing the State on official business, unless otherwise provided by statute. (HAR 3-10-3).
- B. Except as otherwise provided by statutes, this applies to all travel expenses regardless of the source of funding, unless a non-state entity pays for the entire cost of travel (including per diem and all incidental costs) and makes all travel arrangements.
- C. Whenever there is a conflict between these procedures and provisions of the collective bargaining agreement, the provisions of the collective bargaining agreement shall take precedence.
- D. Under Chapter 89, HRS, excluded employees shall receive the same benefits as employees in related bargaining units.

IV. TRAVEL REQUESTS/APPROVALS

- A. All travel requests shall be approved in writing using the Travel Approval Form (TAF) and related Worksheets.
- B. Out-of-state travel requires department head approval.
- C. Intra-state travel may be delegated to division chiefs or as determined by the department.

V. TRAVEL ADVANCES

- A. Travel Advances, with receipt or confirmation, may be requested prior to a trip to cover estimated expenses for:
 - Lodging up to the Federal Allowable Rate or the quoted rate, whichever is less.
 - M&IE up the Federal Allowable Rate.
 - Identifiable costs, i.e. ground transportation, including car rental (if applicable).
- B. Advance per diem and expenses (M&IE) shall be submitted no earlier than fourteen (14) calendar days prior to travel commencement and no less than five (5) calendar days prior to departure date.
- C. Advance payment for lodging, including excess lodging, ground transportation, and other official travel expenses that are approved by the department head or designee, shall be supported by a written invoice, proof of payment, or confirmed reservations that include all reservation details (i.e. hotel confirmation showing nightly room rates and reservation dates). Requests for these types of advance payments shall be submitted together with the request for Advance Per Diem.
- D. Request for advance payments, not supported by proper documentation, shall be rejected but may be submitted with the Statement of Completed Travel, after travel has been completed.
- E. Employees receiving a stipend or funds, from a 3rd party, after the State has prepaid travel expenses shall deposit the stipend back to the General Fund.
- F. A travel advance must be returned immediately if an authorized trip is cancelled or indefinitely postponed. A personal check from the traveler, for the full amount of the advance must be obtained.

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AIRFARE AND BAGGAGE EXPENSES: WORKSHEET A

I. AIR TRAVEL COMMERCIAL AIRLINES

- A. Economy Class – Airfare shall not be more than Economy Class. Any incremental costs, such as but not limited to, preferred seating, extra leg room seating, meals, etc. is the responsibility of the traveler. This applies to all CONUS and OCONUS travel, regardless of the purpose or source of funding. (Note: Choice of fare may include a fare category that allows for a seat selection)
- B. Economy Plus (e.g. Preferred or Extra Leg Room seating, Premium Economy) Business or First Class may ONLY be authorized under special circumstances for example: reasonably accommodate a disability or medical need of a traveler.
- C. Travel Route – Travel routes shall be the most economical and direct route(s) available to the point(s) of destination. Any changes related to travel not applicable to state business is the responsibility of the employee.
- D. Personal deviations include personal preferences regarding air carriers, side trips, stopovers, routings, schedules, and similar choices. Any additional costs resulting from deviations are the responsibility of the traveler. The traveler shall obtain an airfare quote for the authorized portion of the trip, as well as any costs associated with personal deviations.
- E. The pCard shall be used for authorized airfare. Any increase in airfare due to personal deviation(s) is the responsibility of the traveler. The pCard shall not be used to cover any additional expenses resulting from personal deviations.
- F. A nonrefundable ticket associated with a cancelled trip by a pCard or purchase order shall be used for the employee’s next trip or travel credit towards another employee’s authorized travel.

II. WORKSHEET A - COMPUTATION OF AIRFARE AND BAGGAGE EXPENSES

Worksheet A is used to collect airfare quotes, document baggage fees, and identify the selected itinerary for Intra-State or Out-of-State Travel. It ensures compliance with travel requirements, including the requirement for multiple quotes.

- 1. **Select travel type (one box only):**

AIRFARE AND BAGGAGE EXPENSES			
WORKSHEET A <i>Minimum of two quotes required</i>			
Check One:	<input type="checkbox"/> INTRA-STATE (VL Contract No. 23-09):		<input type="checkbox"/> Out-of-State:

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- Intra-State Travel (travel within Hawaii)** requires two airfare quotes for authorized/official business, from two different vendors. See VL Contract 23-09, or as amended.
- Out-of-State Travel:** A minimum of two airfare quotes from different sources (i.e. travel agency, United Airlines, American Airlines, Travelocity, Expedia, etc.) are required for authorized/official business.

2. **Airfare Quotes:** Worksheet A shall reflect the two authorized flight schedules (Itinerary #1 and #2) using the same travel parameters (same dates, similar times, and same destination). Itinerary #3 may be used to document airfare quotes that combine authorized travel with personal deviation(s).

- **Vendor:** Enter the name of the airline(s) or travel vendor(s) providing the quote.
- **Selected Itinerary:** Check the box for only ONE itinerary. Select the most economical airfare (unless otherwise justified) based on the itinerary that best meets the business requirements. The airfare & baggage for the itinerary selected will be reflected in the Worksheet total.
- **Airfare Quote:** Enter the exact airfare total quoted by the vendor.
- **Baggage Fee:** List the total expected baggage cost based on the traveler's needs for all segments. If there is no checked baggage, or no charge for luggage, enter "\$0."

Baggage is limited to one checked bag in accordance with the airline's standard weight and size limits. Travelers must provide justification why more than one (1) bag is necessary.

- **Date of Quote:** Enter the date the quote was received. Multiple quotes must be obtained on the same day to ensure comparability.
- **Flight details:**
 - Date: Travel date for each flight segment
 - Airline: Airlines
 - From: Airport of origin (use airport code, e.g., HNL)
 - To: Destination airport (use airport code, e.g., OGG)
 - Estimated Departure Time: Scheduled departure time
 - Estimated Arrival Time: Scheduled arrival time

Note: The collective bargaining agreement eliminated the 10-hour minimum requirement to arrive at the destination, but it will still be observed for practical reasons.

3. **Justification:** Complete this section if the selected itinerary is NOT the lowest airfare. Examples: "Lowest fare had unreasonably long layovers," "Lowest fare did not meet meeting schedule."

Note: If the original airfare quotes expire or are no longer valid, Worksheet A shall be revised accordingly. Routine fare fluctuations do not require an amended TAF.

4. Enter the total cost of authorized airfare into the appropriate field on the TAF.

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5. Confirmed reservations shall not be made until the TAF has been approved and signed by the appropriate approving authority.

WORKSHEET A <i>Minimum of two quotes required</i>						
Check One:		INTRA-STATE (VL Contract No. 23-09):			Out-of State: <input checked="" type="checkbox"/>	
Itinerary 1	Vendor:	United Airlines			Select Itinerary:	
	Airfare Quote:	\$ 821.23	Baggage fee:	\$ 80.00	Date of Quote: 05/10/26	
DATE	AIRLINE	FROM	TO	DEPT TIME	ARR TIME	
06/02/26	United	HNL	SFO	7:10 AM	3:15PM	
06/07/26	United	SFO	HNL	7:05 AM	9:40AM	
Itinerary 2	Vendor:	Expedia			Select Itinerary: <input checked="" type="checkbox"/>	
	Airfare Quote:	\$ 623.13	Baggage fee:	\$ 80.00	Date of Quote: 05/10/26	
DATE	AIRLINE	FROM	TO	DEPT TIME	ARR TIME	
06/02/26	Alaska	HNL	SFO	11:37AM	7:57PM	
06/07/26	American	SFO	HNL	11:37 AM	5:47PM	
Itinerary 3	Vendor:	Hawaiian Airlines			Select Itinerary:	
	Airfare Quote:	\$ 944.00	Baggage fee:	\$ 120.00	Date of Quote: 05/10/26	
DATE	AIRLINE	FROM	TO	DEPT TIME	ARR TIME	
06/02/26	Hawaiian	HNL	SFO	12:10PM	8:25PM	
06/07/26	Alaska	SFO	LAS	5:00PM	6:45PM	
06/10/26	Hawaiian	LAS	HNL	6:05PM	9:26PM	
All quotes shall be obtained on the same 8-hour work day using the same parameters, i.e., dates, similar times, and destination.						

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PER DIEM: MEAL ALLOWANCES, AND INCIDENTAL EXPENSES (M&IE): WORKSHEET B

I. **PER DIEM** includes an allowance for lodging, meals and related incidental expenses. A maximum specified amount for each day of authorized intra-state or out-of-state travel is established by collective bargaining agreements. The collective bargaining agreement provisions, effective July 1, 2026, have been revised to align with the federal rates.

A. **Intra-state travel** allowance (overnight) is based on the Department of Defense for Outside Contiguous United States, Non-Foreign Overseas and Foreign (OCONUS) travel.

Website: <https://www.travel.dod.mil/Travel-Transportation-Rates/Per-Diem/Per-Diem-Rate-Lookup/>.

Example: Islands of Hawaii (Note: There is no chart that reflects the breakdown for meals.)

Locality	Seasons (Beg-End)	Maximum Lodging	Local Meals	Proportional Meals	Local Incidental	Footnote	Footnote Rate	Maximum Per Diem	Effective Date
[OTHER]	01/01 - 12/31	242	130	74	33			405	10/01/2025
CAMP H M SMITH	01/01 - 12/31	202	130	74	33			365	10/01/2025
CNI NAVMAG PEARL HARBOR-HICKAM	01/01 - 12/31	202	130	74	33			365	10/01/2025
FT. DERUSSEY	01/01 - 12/31	202	130	74	33			365	10/01/2025
FT. SHAFTER	01/01 - 12/31	202	130	74	33			365	10/01/2025
HICKAM AFB	01/01 - 12/31	202	130	74	33			365	10/01/2025
HONOLULU	01/01 - 12/31	202	130	74	33			365	10/01/2025
SLE OF HAWAII: HILO	01/01 - 12/31	199	117	68	29			345	10/01/2025
SLE OF HAWAII: LOCATIONS OTHER THAN HILO	01/01 - 12/31	242	144	81	36			422	10/01/2025
SLE OF KAUAI	01/01 - 12/31	350	132	75	33			515	10/01/2025
SLE OF LANAI	01/01 - 12/31	242	130	74	33			405	10/01/2025
SLE OF MAUI	01/01 - 12/31	354	122	70	31			507	10/01/2025
SLE OF MOLOKAI	01/01 - 12/31	242	130	74	33			405	10/01/2025
SLE OF OAHU	01/01 - 12/31	202	130	74	33			365	10/01/2025

B. **Out-of-State (OCONUS)** travel allowance is based on the Department of Defense for Outside Contiguous United States, Non-Foreign Overseas and Foreign travel.

Website: <https://www.travel.dod.mil/Travel-Transportation-Rates/Per-Diem/Per-Diem-Rate-Lookup/>.

Sample: Japan (Note: There is no chart that reflects the breakdown for meals).

Locality	Seasons (Beg-End)	Maximum Lodging	Local Meals	Proportional Meals	Local Incidental	Footnote	Footnote Rate	Maximum Per Diem	Effective Date
[OTHER]	01/01 - 12/31	208	86	52	21			315	12/01/2025
ADACHI	01/01 - 12/31	358	100	59	25	8		483	12/01/2025
AKASHI	01/01 - 12/31	337	162	90	41			540	12/01/2025
AMAGASAKI	01/01 - 12/31	337	162	90	41			540	12/01/2025
ARAKAWA	01/01 - 12/31	358	100	59	25	8		483	12/01/2025
ASHIYA	01/01 - 12/31	113	91	55	23			227	12/01/2025
ATSUGI	01/01 - 12/31	208	86	52	21	13		315	12/01/2025
ATSUGI NAF	01/01 - 12/31	208	86	52	21	13		315	12/01/2025
AWASHIMA	01/01 - 12/31	212	118	68	29			359	12/01/2025
AYASE	01/01 - 12/31	208	86	52	21			315	12/01/2025

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- C. **Out-of-State (CONUS)** travel allowance is based on the General Services Administration (GSA) for the 48 Contiguous United States and the District of Columbia

Website: <https://www.gsa.gov/travel/plan-book/per-diem-rates>. Use the drop-down box to select a specific State, City or Zip Code. If a city is not represented, the Standard Rate shall apply for all locations without specific rates.

This sample chart represents the maximum daily rates for M&IE for the County of Los Angeles

Primary destination	County	M&IE total	Breakfast	Lunch	Dinner	Incident expense
Los Angeles	Los Angeles / Orange / Ventura / Edwards AFB less the city of Santa Monica	\$86	\$22	\$23	\$36	\$5

Example: Maximum standard daily lodging rates (excluding taxes) for the State of California

Primary destination	County	2025 Oct	Nov	Dec	2026 Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
Standard Rate	Applies for all locations without specified rates	\$110	\$110	\$110	\$110	\$110	\$110	\$110	\$110	\$110	\$110	\$110	\$110

- D. **Federal rates** are based on the federal fiscal year October through September. For travel commencing before July 1, 2026, and terminating after July 1, 2026, the current State per diem rates will prevail. For example, travel commencing on June 29, 2026, and returning on July 2, 2026, the current rates of \$145.00 for out-of-state, and \$90.00 intra-state shall be used.

The applicable federal rates will be used for travel commencing after July 1, 2026, irrespective of any subsequent changes to those rates. For example, the M&IE is \$86.00 per day for travel to Los Angeles commencing on September 29, 2026, returning October 2, 2026. Although the federal rate may change on October 2, 2026, the rate effective as of September 29, 2026 will prevail.

- E. **Computing M&IE Allowance** – in computing the M&IE allowance, the calendar day (midnight to midnight) shall be the unit. For fractional M&IE allowance for departure and return days, use the following table:

If Time of	Allowed on Day of:	
	Departure	Return
12:01 am – 6:00 am	1 day	¼ day (0.25)
6:01 am - Noon	¾ day (0.75)	½ day (0.50)
12:01 pm – 6:00 pm	½ day (0.50)	¾ day (0.75)
6:01 pm - midnight	¼ day (0.25)	1 day

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II. WORKSHEET B – COMPUTATION OF MEALS AND INCIDENTAL EXPENSES - CONUS

Worksheet B is used to calculate Meals and Incidental Expenses (M&IE) for travel to the 48 contiguous United States and District of Columbia. It also determines the appropriate meal allowance when meals are provided at no cost to the traveler or the State. Worksheet B is essential for calculating:

- Rates for overnight travel
- Allowance for same day travel
- M&IE when lodging is provided at no cost to the traveler or State
- Rates when meals are supplied at no cost to the traveler or State

1. Complete the top and bottom sections, as indicated, with type of travel, travel destination, travel dates/times, traveler’s name, and preparer’s name(s).

2. **PART A – Computation of M&IE**

- **Departure Day:** Enter the fractional day based on 90 minutes prior to departure time (using the chart)
- **Full Days:** Count every full 24-hour period between departure and return days.
- **Return Day:** Enter the fractional day based on 30 minutes after the scheduled arrival time at the employee’s home airport (using the chart).
- **Total Days:** Automatically calculated.
- **Rate:** Enter the daily M&IE rate based on the information from the GSA website <https://www.gsa.gov/travel/plan-book/per-diem-rates>

ATTACH A SCREENSHOT OF THE M&IE TO DOCUMENT THE RATE.

Sample M&IE for Dallas, Texas

Primary destination	County	M&IE total	Breakfast	Lunch	Dinner	Incidental expenses	First and last day of travel
Dallas	Dallas	\$80	\$20	\$22	\$33	\$5	\$60.00

- Total A will automatically be calculated based on the input provided.

3. Enter the total M&IE cost from Worksheet B on the appropriate line on the TAF, as applicable.

4. **Part B – Computation of M&IE when lodging is provided** at no cost to the traveler/state. Only meals and incidentals are provided for the full days (unless meals are included in the meeting, training etc.)

<i>Example: Dallas, Texas</i>	Rate	Number of Days	Total
Breakfast	\$20	1	\$20.00
Lunch	\$22	1	\$22.00
Dinner	\$33	1	\$33.00
Calculate the daily incidental rate	\$5	x 6	\$30.00
		TOTAL B	\$105.00

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5. **Part C: Deduction of Meals when meals are provided.**

<i>Example: Dallas, Texas</i>	Rate	Number of Meals	Meal	
	\$20	1	Breakfast	\$20.00
	\$22	1	Lunch	\$22.00
	\$33	1	Dinner	\$33.00
Total C				\$75.00

Note: Incidental Expense rate is not adjusted

Note: M&IE shall not be reduced when meals are provided as part of a conference program. See CM 2012-15 for additional information.

The Grand total will be based on the input of A, B, or C (as applicable).

Worksheet B-CONUS Grand Total: \$ -

III. WORKSHEET B - COMPUTATION OF MEALS AND INCIDENTAL EXPENSES – OCONUS

Worksheet B is used to calculate Meals and Incidental Expenses (M&IE) for travel OCONUS *outside* the 48 contiguous United States, non-foreign overseas (Hawaii and Alaska), and foreign destinations. It also determines the appropriate meal allowance when meals are provided at no cost to the traveler or the State. Worksheet B is essential for calculating:

- Rates for overnight travel
 - Allowance for same day travel (Hawaii only)
 - M&IE when lodging is provided at no cost to the traveler or State
 - Rates when meals are provided at no cost to the traveler or State
1. Complete the top and bottom sections, as indicated, with the type of travel, destination, travel dates/times, traveler’s name, and preparer’s name(s).
 2. Insert the **Local Meals Rate** and **Local Incidental Rate** from the federal website: <https://www.travel.dod.mil/Travel-Transportation-Rates/Per-Diem/Per-Diem-Rate-Lookup/>. This will be used to calculate the meal percentages.
 3. **PART A – Computation of M&IE for OCONUS:**
 - **Departure Day:** Enter the fractional day based on 90 minutes prior to departure time (using the chart).
 - **Full Days:** Count every full 24-hour period between departure and return.
 - **Return Day:** Enter the fractional day based on 30 minutes after the scheduled arrival time at the employee’s home airport. Use the provided quarter-day chart.
 - **Total Days:** Automatically calculated.

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- **Rate:** Enter the daily M&IE rate based on the information from the **DOD** website:
<https://www.travel.dod.mil/Travel-Transportation-Rates/Per-Diem/Per-Diem-Rate-Lookup/>
- **Total A** will automatically be calculated based on the input provided.

ATTACH A SCREENSHOT OF THE M&IE TO DOCUMENT THE RATE.

OCONUS Example: Frankfurt, Germany

Locality	Seasons (Beg-End)	Maximum Lodging	Local Meals	Proportional Meals	Local Incidental	Footnote	Footnote Rate	Maximum Per Diem	Effective Date
FRANKFURT AM MAIN	01/01 - 12/31	258	108	63	27			393	08/01/2025

4. Enter the total M&IE cost from Worksheet B on the appropriate line on the TAF.
5. **Part B – Computation of M&IE** when lodging is provided at no cost to the traveler/state. Only meals and incidentals are provided for the full days (unless meals are included in the meeting, training, etc.)

<i>OCONUS Example:</i> <i>Frankfurt, Germany</i>	Local Meals	Rate/Meal	Number of Meals	Total
20% for Breakfast	\$108	\$22 x	1	\$22.00
30% for Lunch	\$108	\$32 x	1	\$32.00
50% for Dinner	\$108	\$54 x	1	\$54.00
Incidental Expenses				\$27 x 5 = \$135.00

Note: Incidental Expenses rate is not adjusted.

Part C – Deduction of Meals when meals are provided.

<i>OCONUS Example:</i> <i>Frankfurt, Germany</i>	Local Meals	Rate/Meal	Number of Meals	Total
20% for Breakfast	\$108	\$22 x	1	\$22.00
30% for Lunch	\$108	\$32 x	1	\$32.00
50% for Dinner	\$108	\$54 x	1	\$54.00
TOTAL C				\$108.00

The Grand total will be based on the input of A, B, or C (as applicable)

Worksheet B-OCONUS Grand Total: \$ -

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IV. WORKSHEET B - COMPUTATION OF MEALS AND INCIDENTAL EXPENSES – INTRA-STATE (OVERNIGHT)

1. Complete the top and bottom sections, as indicated, with type of travel, travel destination, travel dates/times, traveler’s name, and preparer’s name(s).
2. Insert the **Local Meals Rate** and **Local Incidental Rate** from the federal website: <https://www.travel.dod.mil/Travel-Transportation-Rates/Per-Diem/Per-Diem-Rate-Lookup/>. This will be used to calculate the meal percentages.
3. **PART A – Computation of M&IE:**
 - **Departure Day:** Enter the fractional day based on 90 minutes prior to departure time (using the chart.
 - **Full Days:** Count every full 24-hour period between departure and return.
 - **Return Day:** Enter the fractional day based on 30 minutes after the scheduled arrival time at the employee’s home airport. Use the provided quarter-day chart.
 - **Total Days:** Automatically calculated.
 - **Rate:** Enter the daily M&IE based on the information from the **DOD** website: <https://www.travel.dod.mil/Travel-Transportation-Rates/Per-Diem/Per-Diem-Rate-Lookup/>

ATTACH A SCREENSHOT OF THE M&IE TO DOCUMENT THE RATE.

Total A will automatically be calculated based on the input provided.

Locality	Seasons (Beg-End)	Maximum Lodging	Local Meals	Proportional Meals	Local Incidental	Footnote	Footnote Rate	Maximum Per Diem	Effective Date
[OTHER]	01/01 - 12/31	242	130	74	33			405	10/01/2025
CAMP H M SMITH	01/01 - 12/31	202	130	74	33			365	10/01/2025
CNI NAVMAG PEARL HARBOR-HICKAM	01/01 - 12/31	202	130	74	33			365	10/01/2025
FT. DERUSSEY	01/01 - 12/31	202	130	74	33			365	10/01/2025
FT. SHAFTER	01/01 - 12/31	202	130	74	33			365	10/01/2025
HICKAM AFB	01/01 - 12/31	202	130	74	33			365	10/01/2025
HONOLULU	01/01 - 12/31	202	130	74	33			365	10/01/2025
ISLE OF HAWAII: HILO	01/01 - 12/31	199	117	68	29			345	10/01/2025
ISLE OF HAWAII: LOCATIONS OTHER THAN HILO	01/01 - 12/31	242	144	81	36			422	10/01/2025
ISLE OF KAUAI	01/01 - 12/31	350	132	75	33			515	10/01/2025
ISLE OF LANAI	01/01 - 12/31	242	130	74	33			405	10/01/2025
ISLE OF MAUI	01/01 - 12/31	354	122	70	31			507	10/01/2025
ISLE OF MOLOKAI	01/01 - 12/31	242	130	74	33			405	10/01/2025
ISLE OF OAHU	01/01 - 12/31	202	130	74	33			365	10/01/2025

3. Enter the total M&IE cost from Worksheet B on the appropriate line on the TAF
4. **Part B – Computation of M&IE** when lodging is provided at no cost to the traveler/state. Only meals and incidentals are provided for the full days (unless meals are included in the meeting, training, etc.)

<i>Intra-state Travel Example:</i>	Local Meals	Rate/Meal	Number of Meals	Total
<i>Hilo, Hawaii</i>				
20% for Breakfast	\$117	\$23 x	1	\$23.00
30% for Lunch	\$117	\$35 x	1	\$35.00
50% for Dinner	\$117	\$59 x	1	\$59.00
Incidental Expenses		\$29 x	5	\$145.00

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Note: Incidental Expenses rate is not adjusted.

Note: M&IE shall not be reduced when meals are provided as part of a conference program. See CM 2012-15 for additional information.

Part C: Deduction of Meals when meals are provided.

<i>Intra-state Travel Example:</i>	Local Meals	Rate/Meal	Number of Meals	Total
<i>Hilo, Hawaii</i>				
20% for Breakfast	\$117	\$23 x	1	\$23.00
30% for Lunch	\$117	\$35 x	1	\$35.00
50% for Dinner	\$117	\$59 x	1	\$59.00
			TOTAL C	\$117.00

V. COMPUTATION OF INTRA-STATE TRAVEL (Same-Day Travel)

1. Complete the top and bottom sections, as indicated, with type of travel, travel destination, travel dates/times, traveler's name, and preparer's name(s).
2. Skip Parts A, B, and C.
3. Complete **Section D** (if applicable, traveler is entitled to a \$30.00 allowance for same-day travel).
4. Enter the \$30.00 allowance on the TAF.

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COMPUTATION OF LODGING EXPENSES: WORKSHEET C

- I. **PER DIEM** is an allowance for **lodging**, meals and related incidental expenses. A maximum specified amount for each day of authorized intra-state or out-of-state travel is established by collective bargaining agreements. The collective bargaining agreement effective July 1, 2026, has been revised to align with the federal rates.

- II. **WORKSHEET C** is used to document lodging quotes, identifies the selected property, and calculates excess lodging costs. It ensures compliance with State travel requirements for both intra-state and out-of-state lodging stays, including the requirement of multiple quotes.

Travelers who receive lodging at no cost, whether through accommodation with family or friends, are not eligible to receive lodging expenses.

- 1. Select travel type (one box only):

	<input type="checkbox"/>	HAWAII, ALASKA, AND FOREIGN COUNTRIES (OCONUS)
Check		Click here to look up OCONUS Rates
One:	<input type="checkbox"/>	48 CONTIGUOUS STATES & DISTRICT OF COLUMBIA (CONUS)
		Click here to look up CONUS rates

Intra-state and Out-of-State travel require a minimum of **two** authorized quotes nearest the place of business/meeting/conference, unless staying a conference hotel.

Conference Hotel must be checked if the traveler is staying at a conference hotel (does not require additional quotes).

- 2. Complete the check-in/out dates.
- 3. Complete destination (of authorized business).
- 4. Complete the lodging/hotel information:
 - The number of nights will be calculated based on the check-in & check-out dates.
 - Rates: Insert the daily and total Lodging/hotel rates including taxes and mandatory fees, including the Federal Maximum Rates.
 - Excess lodging will be automatically calculated and displayed, as applicable.

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Selected Hotel	Name of Hotel	Number of Nights	Hotel Rate (per day, incl. taxes & fees)	Total Hotel Rate	Federal Max Lodging (Per Night)	Total Federal Max Lodging	Total Excess Lodging
	Someplace		\$386.28	\$764.56			\$56.56
X	Nowhere		\$355.00	\$710.00	\$354.00	\$708.00	\$2.00

Excess Lodging refers to expenses that exceed the federal allowable rate established by the Department of Defense or the General Services Administration (GSA).

Intra-State and foreign destinations: <https://www.travel.dod.mil/Travel-Transportation-Rates/Per-Diem/Per-Diem-Rate-Lookup/>

Locality	Seasons (Beg-End)	Maximum Lodging	Local Meals	Proportional Meals	Local Incidental	Footnote	Footnote Rate	Maximum Per Diem	Effective Date
ISLE OF MAUI	01/01 - 12/31	354	122	70	31			507	10/01/2025
LONDON	01/01 - 12/31	424	139	79	35			598	06/01/2025

- When the lowest-priced lodging or hotel is not chosen, a justification for the selection must be documented.

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COMPUTATION OF GROUND TRANSPORTATION EXPENSES: WORKSHEET D

I. GROUND TRANSPORTATION

Worksheet D is used to document all ground transportation expenses related to official State travel. It includes but not limited to: Intra- and out-of-State car rentals, ride-share, taxis, shuttles, parking, and public transportation.

A. Intra-State Car Rentals

1. Executive Branch Departments are required to use the Intrastate Car Rental Contract, PL25-04 (or as amended).
2. Car size is limited to a compact car, unless other justified and approved by the department's approving authority. Traveler is personally responsible for deviations (i.e. upgrades).
3. Insurance. The State is self-insured; therefore, travelers do not need to purchase insurance. Any insurance purchased is the personal responsibility of the traveler.

B. Out-of- State Car Rentals

1. Travelers shall use airport and/or hotel shuttle whenever possible. If a car rental is necessary, a minimum of two quotes for a compact car from two different sources, for authorized travel, are required. The pCard may not be used for out-of-state car rentals.
2. Car rentals may be used only when no other cost-effective means are available. Employees are personally responsible for deviations (upgrades, overtime, extensions).
3. Insurance: Loss Damage Waiver (LDW), or Collision Damage Waiver (CDW), or Physical Damage Waiver (PDW) are the ONLY insurance options permitted and reimbursable by the State. All other insurance options are the personal responsibility of the traveler.

II. WORKSHEET D – Computation of Ground Transportation

A. Worksheet D – Intra or Out-of-State Car Rental

Complete the following:

- Pick-up and drop off locations
- Pick up and return dates
- Daily rental rate, including any mandatory fees (for intra-state use the drop-down box to select the duration (daily/weekly/monthly)
- Number of authorized days for the car rental
- Total cost for the authorized dates
- Justification for not renting a compact sized car

B. Worksheet D - Other Ground Transportation Costs

This section captures all **non-rental-car transportation expenses**. Complete the following fields:

- Taxi or Ride Share: Estimated total costs
- Airport/Hotel Shuttle: Estimated shuttle fares
- Parking: Parking fees related to official travel
- Other (subway, bus, rail, metro, etc.): Any public transit used
- Total Estimated Cost: Sum of all ground transportation expenses

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TRAVEL APPROVAL FORM (TAF)

The Travel Approval Form is used to capture all estimated costs from the applicable worksheets and secure written approval from the traveler and approving authorities.

1. Destination: Check the appropriate travel destination designation

TRAVEL APPROVAL FORM			
Check	OCONUS (Foreign or Alaska):		CONUS (Contiguous 48 States):
One:	Intra-state Same Day:		Intra-state Overnight Travel:

2. Traveler Information – Complete all areas, including a justification for the travel

Name of Traveler:		Phone:	
Position/Title:		Bargaining Unit:	
Dept./ Div. / Office:			
Contact Person:		Phone:	
E-mail Address:			
Justification: <small>(Attach additional sheets if necessary including conference/meeting agenda and training)</small>			

3. Event Information – Complete all areas

Date & Time Event Begins:		Date & Time Event Ends:	
<small>(Indicate time employee needs to be at destination including any preconference meetings, etc.)</small>			
Location(s) of Event:			

4. Cost Information – Gather expense information from the Worksheets and input in the appropriate sections.

COST INFORMATION	
Worksheet A: Airfare/Baggage Expenses	_____
Worksheet B: Meals & Incidental Expenses	_____
Worksheet C: Lodging Expenses	_____
Excess Lodging	_____
Worksheet D: Ground Transportation Expenses	_____
Other Expenses (registration fee, training, materials, etc.)	_____
Describe Other Expenses: _____	
TOTAL	\$0.00
Program ID: _____	Appropriation Symbol: _____

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5. Route the TAF and applicable worksheets to the traveler for affirmation of travel costs and check the box affirming that the traveler is entitled to reimbursement for expenses, not previously advanced.

	<input type="checkbox"/>	<i>By checking this box, the employee affirmatively agrees to personally fund travel costs in lieu of a travel advance, with the understanding that they will be reimbursed following the submission of a Statement of Completed Travel.</i>
Traveler Signature	Date	
Traveler Name		

6. Route the TAF to department’s requesting and approving authority as required by departmental procedures.
7. Upon receiving signed approval, traveler (or designee) can proceed with making definite travel reservations.
8. An amended TAF is required only if changes are made to the travel dates, destination, and purpose.

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STATEMENT OF COMPLETED TRAVEL

Statement of Completed Travel, Form SPO-031, (May 2026) shall be used for all submissions. Failure to use the form may result in delays and/or re-submission.

The Statement of Completed Travel, with all applicable worksheets, supporting documents, and receipts are to be submitted within 10 working days upon return to duty. Failure to submit the Statement of Completed Travel in a timely manner may delay the traveler’s reimbursement.

Complete ALL applicable sections:

I. Travel/Traveler Information

- a. Check the appropriate type of travel (only one allowed)

STATEMENT OF COMPLETED TRAVEL

Check One:	OCONUS (Foreign or Alaska): <input checked="" type="checkbox"/>	CONUS (Contiguous 48 States): <input type="checkbox"/>
	Intra-state Same Day: <input type="checkbox"/>	Intra-state Overnight Travel: <input type="checkbox"/>

- b. Complete the traveler information and business destination dates/times based on the flight information

as follows.

Travel Location: _____

Business-Only Departure Date: _____ **Time:** _____

Business-Only Return Date: _____ **Time:** _____

Personal Deviation (if applicable): _____ to _____

Air Transportation

Paid by (check one):	pCard: <input type="checkbox"/>	Traveler: <input type="checkbox"/>	Third Party: <input type="checkbox"/>
Total Airfare & Baggage Cost to State:			_____
Total Reimbursable Airfare & Baggage:			_____

II. Air Transportation Information – indicate how payment was made

- a. Total reimbursable Airfare & Baggage should only be completed if the traveler paid for the airfare

Air Transportation

Paid by (check one):	pCard: <input type="checkbox"/>	Traveler: <input checked="" type="checkbox"/>	Third Party: <input type="checkbox"/>
Total Airfare & Baggage Cost to State:			_____
Total Reimbursable Airfare & Baggage:			\$1,000.00

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b. If payment made by pCard or a third party, indicate Total Airfare & Baggage Cost to the State.

Air Transportation			
Paid by (check one):	pCard: <input checked="" type="checkbox"/>	Traveler: <input type="text"/>	Third Party: <input type="text"/>
Total Airfare & Baggage Cost to State:			\$1,000.00
Total Reimbursable Airfare & Baggage:			<input type="text"/>

III. Meals & Incidentals Expenses

- a. Ensure all relevant sections are accurately completed for CONUS or OCONUS, including any meals that are added or deducted
- b. The selection of CONUS, OCONUS, or Intra-State travel will dictate which section you will be allowed to complete.

Meals & Incidental Expenses- CONUS ONLY						
M&IE for CONUS- (Full or fraction days)						
Dept. Day	Full Days	Rtn. Day	Total Day	Rate	Total	
0.50	1.00	0.25	1.75	\$ 180.00	\$ 315.00	
	Meal when lodging is provided		DEDUCT meals provided at no cost			
	Rate	Days	Total	Rate	Days	Total
Breakfast	\$ 20.00	1	\$ 20.00	\$ 20.00	1	\$ 20.00
Lunch			\$ -			\$ -
Dinner			\$ -			\$ -
Incidental			\$ -			\$ -
Total			\$ 20.00			\$ 20.00
Net Meal Allowance (CONUS):					\$ 315.00	

Meals & Incidental Expenses- OCONUS MULTI DAY ONLY						
				Local Meals Rate: \$ 200.00		
				Incidental Rate: \$ 50.00		
M&IE for OCONUS- (Full or fraction days)						
Dept. Day	Full Days	Rtn. Day	Total Day	Rate	Total	
0.50	1.00	0.50	2	\$ 250.00	\$ 500.00	
	Meal when lodging is provided		DEDUCT meals provided at no cost			
	Pct	Rate	Days	Total	Total	
Breakfast	20%	\$ 40.00	1	\$ 40.00	1	\$ 40.00
Lunch	30%	\$ 60.00	1	\$ 60.00	1	\$ 60.00
Dinner	50%	\$ 100.00	1	\$ 100.00	1	\$ 100.00
Incidental		\$ 50.00	2	\$ 100.00		\$ -
				\$ 300.00		\$ 200.00
Net Meal Allowance (OCONUS MULTI DAY):					\$ 600.00	

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IV. Lodging Expenses

- a. Complete column 1 if the nightly rate remained the same throughout the stay
- b. Complete columns 2 and/or 3 if the nightly rates change, or a 2nd/3rd hotel was needed
- c. Calculate the Total Lodging Cost and Reimbursement Cost.

Lodging Expenses			
	Rate 1	Rate 2	Rate 3
Number of Days:	2	2	2
Room Rate:	\$199.00	\$250.00	\$135.00
Total Hotel Rate:	\$398.00	\$500.00	\$270.00
Federal Max Lodging (per night):	\$150.00	\$150.00	\$150.00
Total Federal Max Lodging:	\$300.00	\$300.00	\$300.00
Total Excess:	\$98.00	\$200.00	\$0.00
Total Lodging Cost to State:			
Total Reimbursable Lodging Cost:			

V. Other Reimbursable Expenses

- a. Indicate additional expenditures (must be accompanied by corresponding receipts)
- b. If entitled to mileage reimbursement, the rate is based on the information from Comptroller Memorandum on "Standard Mileage Rate Announced by the Internal Revenue Service (IRS)"

Other Reimbursable Expenses	
Car Rental & Gas: \$ 900.00	Parking/Milage: \$ 50.00
Ground Transportation:	
Other (Specify)	Amount
something	\$ 50.00
something else	\$ 25.00
more stuff	\$ 15.00
Total Other Expenses: \$ 1,040.00	

VI. Accounting

- a. Document the amounts paid by the State or a third party
- b. Document the amount reimbursable to the traveler
- c. Document the amount that was advanced to the traveler

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The following is an accounting of funds used for travel expenses

A) Expenses Paid directly by state (PO or pCard) or third party:					
B) Lodging, M&IE, and Reimbursable Expenses:					
C) Advanced by State Warrant					
P.O. No.		DBRN No.:	*		

VII. Total Reimbursement or (Due to the State)

- a. Determine the total reimbursement amount, deducting any advance payments made to the traveler
- b. If the amount of an advance payment exceeds the reimbursable expenses, payment from the traveler for the amount due shall be submitted with the Statement of Completed Travel.

Total Reimbursement OR (Due to State of Hawaii)*:					
				<i>*Attach check if necessary</i>	

VIII. Signatures

- a. Submit the form with all documentation and receipts for signatures

IX. Complete Statement of Travel Package

- a. Documentation Required
 - i. Approved (or Amended) TAF and all applicable worksheet
 - ii. All receipts for reimbursable expenses (including lodging & ground transportation)
 - iii. Copy of the boarding pass(es) or digital copy
 - iv. Any other documents required by the department

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ADDITIONAL TRAVEL RELATED INFORMATION

MILEAGE REIMBURSEMENT- (HAR 3-10-13(b)(3)(A))

With the approval of the department head or designee, employees may be reimbursed for mileage when using a privately-owned vehicles to travel between home and the transportation terminal and occurs outside the employee's normal working hours.

If the travel occurs during the employee's normal working day, at a time the employee usually commutes to or from work, mileage reimbursement is allowed only for the miles that are in addition to the usual commuting trip.

The mileage reimbursement rate based on "Standard Mileage Rate Announced by the Internal Revenue Service (IRS)". See Comptroller Memorandum 2026-01, or as amended.

TRAVEL TIME OFF- HGEA SETTLEMENT AGREEMENT (BUS 2, 3, 4, 9 & 13)

The following provisions are contained in the HGEA Settlement Agreement regarding work-related travel.

- Only applicable to same day travel for employees who may earn overtime.
- To the extent possible, official business and associated work-related travel are to occur within the employee's workday. If it is not feasible, the employee's supervisor and the employee may agree to adjust the employee's work schedule so that work-related travel can be conducted during the employee's workday. The employee is not entitled to overtime when an adjustment is made.
- If the employee performs work-related functions, after the end of the employee's scheduled workday, time spent working is work time, and may be entitled to overtime.
- Waiting time is not travel time. Travel time is defined as:
 - For departure from the employee's home island, travel time begins thirty (30) minutes prior to the scheduled departure time and ends at the start of the employee's workday.*
 - For return to the employee's home island, travel time begins when the workday ends on the employee's non-home island.
 - If the employee delays return to the home island, travel time ends at the scheduled arrival time on the earliest flight that the employee could have returned on.
 - For return to the employee's home island, travel time ends at the scheduled or actual arrival time, whichever is later.
 - Travel time is rounded to the nearest fifteen (15) minutes.
- Travel time does not count toward the forty-hour work week limitation.
- Employees who earn travel time shall accumulate travel time off, unless the applicable authority elects to pay the employee for the travel time off or cannot allow the employee to take the travel time off within the specific period.
- Travel time off must be taken within two pay periods, after the pay period in which it was earned. Travel time off not taken within the two pay periods, shall be forfeited, unless the request for time off was disapproved. In such instances, the employee shall be paid for the travel time.

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- Use of travel time off must be requested at least one week prior to the end of the period in which it must be used.
- Accumulated travel time off is forfeited when the employee leaves the position.
- Travel time off and travel time payment is calculated at one-and-a-half hours for each hour.
- The “Travel Time Form,” available on the SPO website shall be used to document any travel time earned.

*HGEA Travel Time Off rules are separate from the computation of M&IE.