How to Submit an Expense Report for a TB Test Reimbursement

Continuing District employees are eligible for a $10.00 TB Test reimbursement for cost associated with TB testing. Requests for reimbursement must be submitted through an Expense Report in PeopleSoft FIN. Test results (proof of clearance) must be sent to Human Resources, attn. Krista Conn. Receipts must be sent to Accounts Payable.

Follow the steps below submit a TB Test Reimbursement Expense Report in PeopleSoft FIN.

1. Log on to PeopleSoft FIN: https://dwa.sandi.net/hcm/signon.html

2. Enter your six digit UserID (Employee ID) and DWA Password. Then, click Sign In.

3. On the Homepage, select Travel and Expenses.
4. From Expense Reports menu, click Create/Modify.

5. Click Add a New Value to create a new report.

Your Employee ID number should display.

6. Click Add.
7. Complete the **Create Expense Report** page (**Note**: Asterisk * indicates a required field).

**Header**

- **Business Purpose**: Select *Other-written desc required* from drop-down
- **Report Description**: Enter TB Test and *year*. For example, *TB Test 2019*
- **Default Location**: Enter San Diego

**Expenses**

- **Date**: Enter date of TB test. Cannot be a future date
- **Expense Type**: Select *TB Test Reimbursement* from drop-down
- **Description**: Enter *TB test*.
- **Payment Type**: Select *Cash or Personal Check* or *Personal Credit Card* from drop-down
- **Amount**: Enter $10.00
- **Location**: Enter San Diego
- **Merchant**: Select *Non-Preferred*. Enter name of healthcare facility or doctor who performed test
8. When finished, click **Summary and Submit**.

9. On **Create Expense Report page**, check the **Certification box**. Then click **Submit Expense Report**.

Create Expense Report

<table>
<thead>
<tr>
<th>Business Purpose</th>
<th>Other-written desc required</th>
<th>Description</th>
<th>Reference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kris Doe</td>
<td>TB Test 2019</td>
<td>TB Test</td>
<td></td>
</tr>
</tbody>
</table>

**Totals**

- Employee Expenses (1 Line): 10.00 USD
- Non-Reimbursable Expenses: 0.00 USD
- Cash Advances Applied: 0.00 USD
- Prepaid Expenses: 0.00 USD

**Amount Due to Employee**: 10.00 USD

By checking this box, I certify the expenses submitted are accurate and comply with expense policy.

Submit Expense Report
10. Click **OK** to confirm submission.

The confirmation page will display a “...submitted for approval” message. Reimbursement amount appears as “Amount Due to Employee”.

11. Click **View Printable Version** to print report.


13. Send hardcopies of documents to district departments:
   - **Accounts Payable, Ed Center, rm 3141**-TB Test Reimbursement Expense Report & original receipt taped to blank 8 ½ x 11 inch paper. Make copy for personal records.
   - **Human Resources (attn: Krista Conn)** -Proof of clearance (test results).