

Mobile Cellular Device - Allowance Template

Instructions:

Section:

- 1 Please enter the date, employee's name and title, division or department, and the project id. Information should match the MCD Allowance Form. For the project id, it can be either the 6 digit or 6-5 digit id.
- 2 This section is for the type of reimbursement requested. Enter yes or no in the highlighted boxes. If cell phone only, enter yes in the first box and no in the second box. If data only enter no in the first box and yes in the second box. If you are requesting both cell and data both boxes should be yes.
- 3 On line 3.C, enter in the total cell phone amount in the yellow highlighted cell. This will be the total amount of the bill for items requested (voice only, data only, or both voice and data).
If requesting voice, enter the cost without discounts, taxes and other charges on line 3.A in the highlighted cell
If requesting data, enter the cost without discounts, taxes and other charges on line 3.B in the highlighted cell.
If voice and data are not broken out on the bill then split the amount 50/50.
The amounts entered for Line 3.A and B will not equal line 3.C due to taxes, discounts, etc.
The amount on Line 3.C will assist in the calculation of the total voice and data amounts by prorating taxes etc. and adding those additional amounts to the base plans on Lines 3.A and 3.B.
- 4 Section 4 is automatically calculated. The amount paid will be the lesser of the employee calculated amount or the maximum amount on Line 3.C Item 1
Line 4.C blue highlighted column is the total to be reimbursed each month. The maximum allowance is \$40 per month.

Please attach a copy of the monthly cell phone bill.

Questions please email or call Lynn Stallings at lynn_stallings@ncsu.edu or 5-

Mobile Cellular Device - Allowance Template					
2014 Allowance Maximums					
Cell Phone - Voice Plan Allowance Maximum	\$20				
Cell Phone - Voice and Data Plan Allowance Maximum	\$40				
Data Device - Data Plan Only	\$20				
1. Data Item					
Date:	Requestor or Requestor's Department Enters Information Below:				
Name:	January 1, 2014				
Title:	John Doe				
Division/Department:	Accounting Manager				
Project ID	Finance				
	221085				
2. Enter Employee MCD Reimbursement Requested					
Description	Employee Reimbursement Requested (Yes / No)	Maximum Reimbursement Amount Requested	Information in this section should match the MCD Allowance Form.		
2.A Cell Phone Voice Allowance (\$20 Per Month)	Yes	\$ 20.00	Information in this section should match the MCD Allowance Form.		
2.B Cell Data Allowance (\$20 Per Month)	Yes	\$ 20.00			
2.C Total Employee Amount Requested (Maximum Payment Allowable)		\$ 40.00			
3. OSBM Employee Phone / Data Payment Documentation Test (From employees monthly invoice)					
Description	Employee Reimbursement Requested (Yes / No)	Employee's Base Plan Cost (w/o discounts, taxes, other charges)	Percent to Base Plan Cost Total	Employees Calculated Actual Wireless Voice and Data Costs	Information in this section should be entered based on the charges in the employee documentation.
3.A Employee's Voice Plan Monthly Base Plan Cost	Yes	\$9.99	25%	\$ 11.24	Information in this section should be entered based on the charges in the employee documentation.
3.B Employee's Data Plan Monthly Cost Base Plan Costs	Yes	\$30.00	75%	\$ 33.76	
3.C Employee's Wireless Monthly Bill Total		\$45.00	100%	\$ 45.00	
4. Lessor of Employee MCD Allowance Requested in item 1 versus actual employee phone / data payment documentation test from item 3					
Description	Employee Reimbursement Requested (Yes / No)	Maximum Reimbursement Amount Requested (Item 1)	Employees Calculated Actual Wireless Voice and Data Costs (Item 2)	MCD Allowance To Be Reimbursed to Employee (Lesser of item 1 or 2)	Information in this section is automatically calculated based on the information provided in the Sections 1 and 2 of this form.
4.A Cell Phone Voice Allowance (\$20 Per Month)	Yes	\$ 20.00	\$ 11.24	\$ 11.24	Information in this section is automatically calculated based on the information provided in the Sections 1 and 2 of this form.
4.B Cell Data Allowance (\$20 Per Month)	Yes	\$ 20.00	\$ 33.76	\$ 20.00	
4.C Total Employee Amount Requested (Maximum Payment Allowable)		\$ 40.00	\$ 45.00	\$ 31.24	
					<---MCD Allowance For Entry To Financials System