

CIVIL AIR PATROL NATIONAL HEADQUARTERS MAXWELL AFB AL 36112-6332

Finance

PAYMENT FOR CIVIL AIR PATROL SUPPORT

This regulation establishes procedures for processing claims by Civil Air Patrol (CAP) members and units for costs incurred while participating in reimbursable missions. It applies to all CAP personnel involved in the submission and review of CAP mission reimbursement vouchers. **Note: This regulation is revised in its entirety.**

1. General.

a. Disbursement of congressionally allocated funds for CAP may be used to furnish, pay or reimburse CAP for the following items (including taxes) while participating in an Air Force-assigned mission:

1) Automotive fuel and lubricants actually used while enroute to/from and while performing the mission. The state director/deputy state director, CAP-USAF liaison office (LO) is responsible for ensuring that reimbursement requests for fuel and lubricant expenses are reasonable.

2) Aircraft expenses while enroute to or from a mission and while performing the mission at the rates shown at **attachment 1**. Other allowable aircraft expenses are: oxygen service, and for actual missions only – essential hanger fees, and aircraft preheat/de-ice. The LO is responsible for ensuring that reimbursement requests for such expenses are reasonable.

a) Minor maintenance payments to wings for corporate-owned aircraft will be used exclusively to upgrade and maintain the corporate aircraft fleet. The current rates for aircraft minor maintenance are published at **attachment 1**.

b) Tail number accounting refers to the tracking, by tail number, of all A/C maintenance reimbursement received for all missions. Conversely, it also refers to the tracking, by tail number, of expenditures of that reimbursement for aircraft maintenance. Tail number accounting should track <u>ALL</u> maintenance or modification to all CAP owned aircraft, regardless of whether it is minor or major. It should also track <u>ALL</u> fund sources used to pay for that work, whether from AF, state, dues or donations. *Tail-number accounting* will be accomplished by utilizing the "class" feature within QuickBooks Pro 2001 (the accounting software recently purchased by the National Headquarters for all region and wing finance departments). The use of these "classes" makes it possible for every maintenance payment or expenditure to be quickly and easily associated with a particular aircraft tail number.

c) For assistance with this feature, please contact your region internal control & assistance monitor (ICAM).

- 3) Commercial communications expenses associated with the mission and fuel for generators.
- 4) Counterdrug (CD) administrative costs, equipment, travel and per diem expenses associated with the mission.

b. Reimbursement from other organizations will be in accordance with the current memorandum of understanding (MOU) or letter of agreement (LOA) with that organization.

c. Absolute minimum acceptable documentation for reimbursement/payment of vouchers is that which is stated in this regulation. Presigned, *Multilith*, computerized signatures or mimeographed certificates and unauthorized forms are not acceptable.

d. A documentation flow chart is at **attachment 2**.

2. Specific Requirements.

a. Members will:

1) Complete an original of CAPF 108, items 1 through 12A. A sample CAPF 108 can be found at **attachment 3**. **NOTE**: Regardless of whether or not a reimbursement claim is made, all pilots must submit all reimbursable mission flight time to wing on a CAPF 108, *CAP Payment/Reimbursement Document for Aviation/Automotive/Miscellaneous Expenses*, showing aircraft number, ownership, and flying time. If a charge is made to a wing for fuel purchases paid for by a member, the original copy of the receipt showing the amount of fuel serviced and the total cost must be attached to the CAPF 108. To ensure timely reimbursement, CAPFs 108 should be submitted to the wing as soon as possible but not more than 60 days after mission completion. Additionally, at the end of the fiscal year, all reimbursements must be forwarded to the wing as soon as possible to ensure that adequate coordination time is allowed such that, finally, NHQ CAP/FMF receives the reimbursement requests not later than 31 December.

2) Attach the original receipts, bills, etc.

3) For communications costs, attach the original telephone bill with calls and cost identified. If pay telephones were used for official communications, the member may submit a signed statement listing the calls by date, location and number called, and the cost of each individual call.

4) All Forms 108 for CD missions, search and rescue (SAR) missions and related mission expenses will be forwarded to wing.

b. Wings will:

1) Complete and forward a consolidated Form 108 with receipts and pertinent mission forms (CAPF 84, CAPF 122, ICS Form 211, etc.) to the LO. A CAPF 84 must accompany each CAPF 108 submitted for counterdrug missions. Partial mission claims may be submitted, but must be noted in block 5 of the Form 108. Follow-on partial claims will be identified in block 1 of the Form 108 by adding a sequential alpha character at the end of the mission number (example: original-02M02338A-A; next follow-on partial-02M02338A-B). The LO will certify that the reimbursement request is appropriate, sign and date the form, then forward it to NHQ CAP/FMF signifying it as valid for payment. Additionally, all end-of-fiscal year reimbursement requests must be presented to NHQ CAP/FMF for payment not later than 31 December. Note: All requests for reimbursement to a wing must be submitted on a CAPF 108 (modified versions of the form are not acceptable). Receipts need not be submitted with the CAPF 108, when forwarded to NHQ CAP/FMF for payment, but will be retained at the wing level in accordance with item 2c below.

2) For wing and member claims, ensure that the wing commander or his/her designee signs and dates the CAPF 108 in item 12B. The wing commander may not designate more than two wing staff senior members to approve claims on the CAPF 108. Appointments must be in writing and on file at the wing's office and a copy must be provided to the LO.

3) Ensure members' claims are paid no later than 30 days after receipt of the reimbursement payment.

c. Documentation. At the wing's discretion, original mission reimbursement documentation and receipts will be maintained in either the wing or LO files. However, depending upon which office the files are kept in, the other office may either share those files or request copies of them. See CAPR 10-2 for storage and disposition of documentation.

d. CAPFs 108 received at NHQ CAP/FMF beyond 90 days of the mission close out date will not be reimbursed.

3. Supplementary Counterdrug (CD) Mission Reimbursement.

a. Administrative Reimbursement. An administrative allowance of 15% is added to cover certain wing CD expenses and entered in column J of the CAPF 108.

1) An administrative reimbursement is directed to the appropriate wing/region based on the mission authorization number.

2) Administrative funds are for the support of the CD program and must be tracked and accounted for in a separate category. Examples of appropriate uses for these funds include: the hiring of employees to support the CD program; for travel and per diem expenses of CAP personnel in support of CD missions; and for equipment needed for mission support or performance.

3) CD administrative funds are *not* to be used to fully fund non-CD programs or items. However, it is permissible to prorate the cost of some items used at the wing headquarters, i.e., prorated cost of fax machine.

b. Overnight Reimbursements.

1) LOs will preapprove reimbursement for overnight stays, to include ground transportation, in conjunction with USAF-assigned missions if any of the following exists:

- a) An overnight stay is required or requested by the using agency (USCS, DEA, etc.).
- **b**) An overnight stay is more cost effective than round trip transportation to the mission location.
- c) Weather prevents the aircrew's return to base.
- d) Mission requirements dictate and judgment shows that an overnight stay is warranted.

2) Per diem will be no more than \$75 per day for lodging and \$25 per day for meals. Lodging receipts are required. Single occupancy room rates may be reimbursed up to \$75. Shared room rates will be reimbursed at their actual rate but may not exceed \$120 per day (i.e., \$60 per person).

3) Mission numbers will be used in lieu of travel orders. Reimbursements will be filed on and paid from the CAPF 108; *CAP Payment/Reimbursement Document for Aviation/Automotive/Miscellaneous Expenses* and forwarded in accordance with instructions in paragraph 2.

c. Region counterdrug directors are given a budget each year as determined by NHQ CAP/DOH.

1) Per diem will be in accordance with Joint Federal Travel Regulations (JFTR). Transportation and lodging receipts are required. CAPF 1351-2, *CAP Travel Voucher*, will be used for reimbursement and is sent to NHQ CAP/DOH.

2) One CAP corporate "blanket" travel order will be set up annually for each region counterdrug director and assistant(s) for travel within their region. Travel outside region requires NHQ CAP/DOH approval.

3) Other expenses are filed through the respective region commander to the CAP-USAF/LR using the CAPF 108 for reimbursement. See paragraph 3.a.2) for examples.

- d. Other. When NHQ CAP/DOH directs travel the following procedures apply:
 - 1) NHQ CAP/DOH issues approval for travel in advance.
 - 2) Travel arrangements, pricing and allowances will be coordinated with or directed by NHQ CAP/DOH.
 - 3) Per diem will be in accordance with JFTR. Transportation and lodging receipts are required.
 - 4) CAP corporate travel orders are required. CAPF 1351-2 is used for reimbursement.
 - 5) CAPFs 1351-2 are sent to NHQ CAP/DOH.

4. Peacetime Disaster Relief (DR) Operations Reimbursements. Disaster relief missions will be executed in accordance with the provisions of CAPR 60-3, *CAP Emergency Services Training and Operational Missions*. Procedures for the "actual" funding of these missions are outlined in **attachment 4**.

5. CAP Cadet Orientation Flights. The reimbursement process for cadet orientation flights is similar to that for mission reimbursements except that reimbursements for cadet orientation flights are submitted on a CAPF 7 or CAPF 7T. The wing is responsible for ensuring the accuracy and completeness of all cadet orientation flight reimbursement requests. Once the accuracy and completeness of the request has been verified, the wing must sign and date the form and forward it to the wing liaison office. The LO will determine the appropriateness of the reimbursement, then sign and date the form signifying USAF approval of the reimbursement request. The LO will then forward the CAPF 7 or CAPF 7T to NHQ CAP/CPF via fax at (334) 953-6699 (DSN 493-6699) or by mail to NHQ CAP/CPF. Orientation flights will be submitted to National Headquarters not later than 90 days after the flight date. (*Modified versions of the Forms 7 and 7T are not acceptable.*)

4 Attachments

- 1. Aircraft Flying Hour Minor Maintenance Payment Rates
- 2. Flow Chart for Processing CAPFs 108
- 3. Sample CAPF 108
- 4. Flow Chart for CAP Disaster Relief (Actual) Mission Funding

SUMMARY OF CHANGES.

Updates CAPF 108; changes flow charts for CAPFs 108; incorporates new procedures for SAR and new aircraft flying hour minor maintenance payment rates; and addresses new procedures for cadet orientation flight reimbursements.

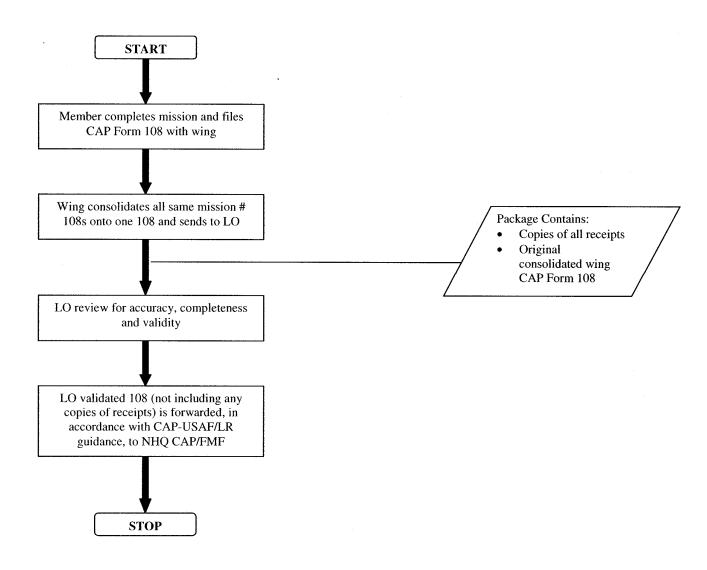
— — — —		— •	— — — —		
Type 1	Type 2	Type 3	Type 4	Type 5	Type 5*
<130HP	130-199 HP	200-249 НР	250-299 НР	300 HP or >	300 HP or >
\$25.00	\$30.00	\$41.00	\$62.00	\$46.00	N/A
AK, HI, & PR Rat	ies				
N/A	N/A	\$45.00	N/A	N/A	\$81.00*
C150	C172-150	C172RG	C182RG	A185	*DH2 Beaver
C152	C172-	C172XP	T182	U206-300	ONLY
	160/180/195	C177RG	T182RG	T206	
	C177-180	C177-200	C182-250	C210-300/310	
	Beech BE-23	C182	C182-265	PA-32- 300/301T	
	Husky	Beech BE-33-225	U206-285	PA-32R-300	
	Maule M-4/5/6/7-	Maule M-4-200	C210-285	/301T	
	180	Maule MT-7-235	Beech A36-285	PA-32-300	
	Mooney M20-180	Mooney M20-201	Beech BE 33/	Gippsland GA-8	
	Piper PA-28- 140/150 Piper PA-28-160/ 180/181	Mooney 231/	35-285		
		252TSE -210	PA-32-260		
		Piper Arrow- 200/201/			
	Piper Arrow-180	200/2017 201T			
		Piper PA-28-235			

Attachment 1. Aircraft Flying Hour Minor Maintenance Payment Rates EFFECTIVE 1 SEPTEMBER 2005

Notes:

- 1. Reimbursement rates have been established to encourage the use of economical, mission capable aircraft.
- 2. Use of member-owned or member-furnished aircraft must be approved in advance by the appropriate Air Force approval authority for all Air Force missions and by the Wing/Region Commander or Director of Operations/Director of Emergency Services for all corporate missions.
- 3. The use of all twin-engine aircraft, for any mission, requires prior approval through the wing/region <u>and</u> the National Operations Center. Wing/Region Commanders (Region Counterdrug Directors for counterdrug missions) should send requests well in advance to the NOC at opscenter@capnhq.gov. Once approval has been obtained from the NOC, the NHQ staff will determine the reimbursement rate and notify the wing/region in writing.
- 4. These rates apply to corporate-owned aircraft. Member-owned or furnished single-engine aircraft add \$19 per hour.
- 5. Aircraft fuel, lubricants, de-icing payments, and other mission essential supplies are authorized for participation in Air Force assigned reimbursable missions and are in addition to the above rates (receipts required).
- 6. Corporate glider tow aircraft are reimbursed at the appropriate rate for their type classification. Reimbursement for noncorporate glider tows participating in the Cadet Glider Flight Orientation Program will be based on the actual cost of the tow (receipts required).
- 7. Glider maintenance reimbursement will be on an actual cost basis. Submit receipts for all expenses incurred by each glider to NHQ CAP/LGM for payment or reimbursement. Major maintenance actions require a control number from NHQ CAP/LGM <u>prior</u> to repairs being accomplished. Major maintenance actions include: fabric replacement, glider repainting, interior work, and avionics replacement. Submit receipts for these actions when repairs are completed. Submit all other maintenance expenses monthly. <u>ORIGINAL RECEIPTS ARE REQUIRED FOR ALL</u> <u>PAYMENTS/ REIMBURSEMENTS.</u> Tail number accounting principles must be followed for gliders.
- 8. To properly figure the reimbursement authorized, multiply the total number of hours flown times the rate allowed for the appropriate aircraft type classification to determine the amount reimbursed for aircraft minor maintenance. Add to the aircraft minor maintenance reimbursement the total for actual fuel, lubricants, de-icing, and other authorized expenses to determine the "total" reimbursement. If a single-engine aircraft is not listed in any of the categories, determine the "Type" from the table above by the aircraft's horsepower (HP) or contact NHQ CAP/LGM at (334) 953-6032.

Attachment 2. Flow Chart For Processing CAPFs 108



	YMENT/REIN	CAP PAYMENT/REIMBURSEMENT DOCUMEN AVIATION/AUTOMOTIVE/MISCELLANEOUS EXI	T DOCUN	1 - J - L - I		1. MISSION NUMBER	3ER 02M0357TXA		START DATE: 1 Mar 02	1 Mar 02		STOP DATE: 3 Mar 02
2. TYPE MISSION: SAR/DR DEA/USFS			CUSTOMS		3. CLAIMANT (V Sample Wing	3. CLAIMANT (Wing/Member) Sample Wing		4. MAII 105 S.	LING ADDRES Hansell St.,	 MAILING ADDRESS/PHONE NUMBER 105 S. Hansell St., Montgomery, AL 3 	зек L 36112/334-953-1116	953-1116
5. INVOICE (H	Print or Type) (F	d the	nstructions	on the re	verse)				PARTIAL	\$	ESTIM	ESTIMATE OUTSTANDING
A. DATE	B. TYPE AIRCRAFT OR VEHICLE	C. AIRCRAFT ID/ VEHICLE LICENSE	D. AIRCRAFT/ VEHICLE OWNER	RAFT/ OWNER	E. HOURS FLOWN	F. HOURLY RATE A/C MINOR MAINTENANCE	G. AIRCRAFT COST CLAIMED	H. FUEL AND OIL COST CLAIMED	I. COMM COST CLAIMED	J. ADMIN (IF APPLICABLE)	K. OTHER COST CLAIMED	L. SUB-TOTAL CLAIMED
3 Mar 02	Maule 180 HP	N99245	X CORP	MBR	1.5	\$30.00	\$45.00	\$37.50		\$12.38		\$94.88
						、 、						
						TOTAL CLAIMED BY CATEGORY	6. ACFT COST \$ 45.00	7. FUEL/OIL \$ 37.50	8. COMM \$	9. ADMIN \$ 12.38	10. ОТНЕR \$	11. GRAND TOTAL \$ 94.88
12. CERTIFICAT A. CAP MEMBE I CERTIFY THAT MISSION AND AC	IONS ER: THE AMOUNTS (CCURATELY REFI	 CERTIFICATIONS CAP MEMBER: CAP MEMBER: I CERTIFY THAT THE AMOUNTS CLAIMED WERE PAID FROM MY PERSONAL FUNDS FOR PARTICIPATION IN THE LISTED USAF AUTHORIZED I CERTIFY THAT THE AMOUNTS CLAIMED WERE PAID FROM MY PERSONAL FUNDS FOR PARTICIPATION IN THE LISTED USAF AUTHORIZED MISSION AND ACCURATELY REFLECT HOURS FLOWN, AUTOMOTIVE FUEL/OIL USED, AND/OR OTHER MISCELLANEOUS COSTS INCURRED. 	ID FROM MY NN, AUTOMC	PERSONA DTIVE FUEL	L FUNDS FOF	R PARTICIPATION I	N THE LISTED USA	VF AUTHORIZED		L SIGNATURE AND DATE		
B. WING COMM. I CERTIFY THE A	ANDER: ABOVE EXPENSE	B. WING COMMANDER: I CERTIFY THE ABOVE EXPENSES ARE A DIRECT RESULT OF SUPPORT/PARTICIPATION IN THE ABOVE LISTED USAF AUTHORIZED MISSION.	ESULT OF SI	UPPORT/P/	ARTICIPATIO	N IN THE ABOVE LI	STED USAF AUTH	ORIZED MISSIO		signature and date Sample Wing, Com	siGNATURE AND DATE Sample Wing, Commander, 3 Mar 2002	2002
C. STATE DIREC I CERTIFY THIS (CTOR/DEPUTY S ⁻ CLAIM IS TRUE AI	C. STATE DIRECTOR/DEPUTY STATE DIRECTOR, CAP-USAF LIAISON I CERTIFY THIS CLAIM IS TRUE AND PROPER FOR PAYMENT.	AP-USAF LIA	VISON OFFICE	Ú.				LtC	signature and date LtC. Sample Wing	siGNATURE AND DATE LtC. Sample Wing LO, 3 Mar 2002	02
D. CAP-USAF/G Printed Name, Tit	SOVERNMENT OF	D. CAP-USAF/GOVERNMENT OFFICIAL AUTHORIZED TO RECEIVE SUPPLIES/SERVICES-RECEIVED Printed Name, Title, Mailing Address, and Telephone Number	ED TO RECEI Imber	IVE SUPPLI	IES/SERVICE:	S-RECEIVED	E. MORD NUMBER	ER	SIGN	SIGNATURE AND DATE		
CIVIL PENALTY I "THE CLAIN DOUBLE TH (SEE 31 U.S	FOR PRESENTIN AANT SHALL FOR 4E AMOUNT OF C 5.C. 3729) (APP	CIVIL PENALTY FOR PRESENTING FRAUDULENT CLAIM. "THE CLAIMANT SHALL FORFEIT AND PAY TO THE UNITED STAT DOUBLE THE AMOUNT OF DAMAGES ŠUSTAINED BY THE UNITE (SEE 31 U.S.C. 3729) (APPLICABLE TO ALL SIGNATORIES)	AIM. THE UNITED IED BY THE L GNATORIES	STATES TI JNITED ST.	HE SUM OF T ATES. ¹	TES THE SUM OF TWO THOUSAND DOLLARS PLUS ED STATES.	OLLARS PLUS	CRIMINAL "FINE OF 1 IN PRISON (SEE 18 U.	PENALTY FOR VOT MORE THA I OR BOTH." S.C. 287.1001)	PRESENTING FRA N TEN THOUSAND (APPLICABLE TC	UDULENT CLAIM. DOLLARS OR NOT ALL SIGNATORIES	CRIMINAL PENALTY FOR PRESENTING FRAUDULENT CLAIM. FINE OF NOT MORE THAN TEN THOUSAND DOLLARS OR NOT MORE THAN FIVE YEARS IN PRISON OR BOTH." (SEE 18 U.S.C. 287.1001) (APPLICABLE TO ALL SIGNATORIES)
CAPF 108, MAY 02	AY 02	PREVIO	PREVIOUS EDITIONS		L NOT BE I	USED AFTER 3	WILL NOT BE USED AFTER 31 AUGUST 2002.		DRM CANNO	THIS FORM CANNOT BE MODIFIED.	_	OPR/ROUTING: FM

Attachment 3. Sample CAPF 108

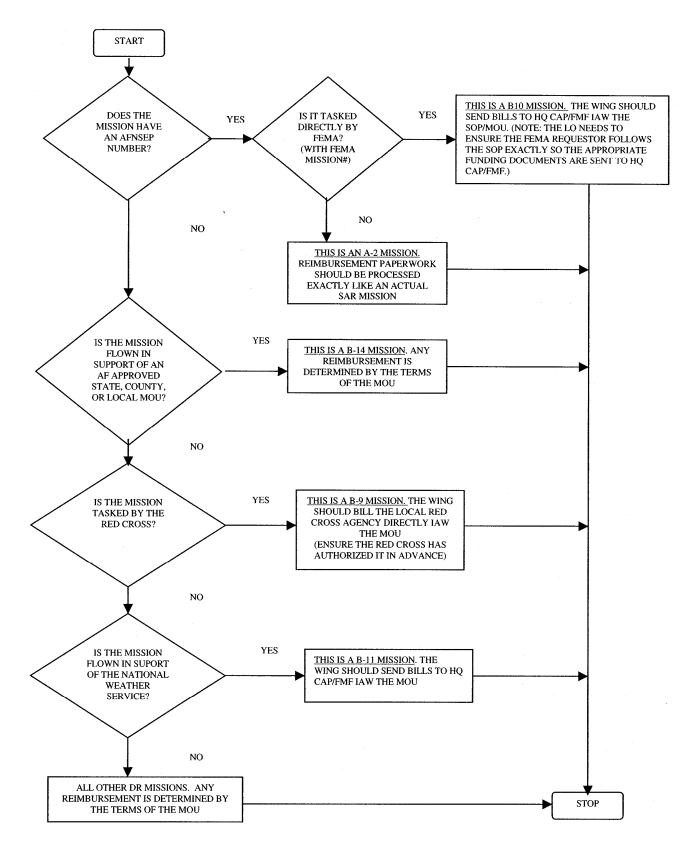
	INSTRUCTIONS FOR COMPLETING THE CAPF 108 (Applicable to all personnel/units submitting reimbursement/payment claims)
 All pilots reimburs Members Wings m 	All pilots flying on USAF authorized reimbursable missions MUST SUBMIT a CAPF 108 to the wing showing aircraft flown, ownership, and flying time (blocks 5A-K) even if no individual claim for reimbursement is made. This information is required for statistical purposes. Members must submit original CAPF 108 and appropriate receipts to the wing not later than 30 days after the close of the mission (60-day adjustment period). Wings must prepare a consolidated mission CAPF 108 and include corporate aircraft expenses.
BLOCK 1.	Enter mission number and mission inclusive dates. Add sequential alpha character to adjustment claims.
BLOCK 2.	Check the appropriate block for the type mission, one block only! If "Other," describe in the block labeled "Total Claimed by Category" below columns A-F.
BLOCK 3.	Enter member name (or wing name on the consolidated 108).
BLOCK 4.	Enter appropriate mailing address/phone number for entry in block 3.
BLOCK 5.	Check the appropriate block to identify if this is a partial or the final claim for the mission (block 1). If there are more claims, enter the estimated dollar amount required for the closure of the mission. NOTE: A separate line entry must be made for each aircraft/vehicle unitized.
BLOCK 5A.	Enter date expense incurred (as shown on receipt).
BLOCK 5B.	Enter the type of aircraft or vehicle.
BLOCK 5C.	Enter the aircraft registry number or vehicle license plate number corresponding to 5B.
BLOCK 5D.	Check appropriate block to identify entry in 5B.
BLOCK 5E.	Enter aircraft hours(hobbs) flown for entry in 5B.
BLOCK 5F.	Enter the hourly aircraft minor maintenance rate for aircraft type entered in 5B. Reference current rates published by NHQ CAP/DO.
BLOCK 5G.	Multiply the entry in 5E by 5F and enter the result.
BLOCK 5H.	Enter the amount claimed for the entry in 5B and attach original receipt(s).
BLOCK 5I.	Enter amounts claimed and attach original receipts.
BLOCK 5J.	For consolidated CAPFs 108, the wing calculates the amount claimed for administration for missions so authorized (CD, INS, etc.). Add block 5G and 5H. Multiply the result by 15% and enter the result in Block 5J. This calculation is based on corporate and member owned aircraft and no other items.
BLOCK 5K.	Enter amounts claimed for aircraft oxygen service, authorized TDY expenses, etc., and attach original receipts.
BLOCK 5L.	Enter the sum of 5G through 5K as appropriate.
BLOCK 6.	Enter the total of column G.
BLOCK 7.	Enter the total of column H.
BLOCK 8.	Enter the total of column I.
BLOCK 9.	Enter the total of column J.
BLOCK 10.	Enter the total of column K.
BLOCK 11.	Enter the total of entries in blocks 6 through 10 OR total of column 5L (both should be equal).
BLOCK 12.	Read, complete, sign, and date the appropriate block.

7

REVERSE

CAPF 108, MAY 02







CIVIL AIR PATROL NATIONAL HEADQUARTERS MAXWELL AFB AL 36112-6332

CHANGE 1 CAP REGULATION 173-3 31 AUGUST 2005

Finance

PAYMENT FOR CIVIL AIR PATROL SUPPORT

CAP Regulation 173-3, 3 May 2002, is changed as follows:

Page-Insert Changes.

Remove	Insert
3/4	3/4

Note: Shaded areas identify new or revised material.