# Global Associate Mobility Engine (GAME)

## How to guide – Expense Submission for Relocation Trips



## Global - Corporate Relocation Shares Services (G - CRSS)

### INTRODUCTION:

- This document is intended to support you with submitting expenses into the Global Associate Mobility Engine (GAME) system. The following contains step by step instruction with images to ease your system experience. To locate a particular subject or term, simply click (Ctrl + F) on your keyboard to open a search bar.
- Please note that instructions for submitting expenses from a mobile device begin on page 8.

### First Steps:

Upon login into GAME, the Expense Management Gadget will be displayed in your Homepage.

As a relocating associate you are responsible for submitting all travel expenses in GAME, i.e. Pre-Move meals, Final Move mileage, etc. All other expenses need to be submitted to your relocation consultant. i.e. Renter One Month, U-Haul

## Walmart recommends that you have electronic versions of receipts or documentation available before you begin entering a new Expense Report.

1. Click the Create New Expense Report button to open a new blank Expense Report where a new reimbursement can be requested.



2. Select Report Name from Dropdown that best describes the expenses incurred, i.e. **Pre-Move Trip** 

|                   |            |                            |                |                |               |       |           |                 |            | Back                 | to Main  |
|-------------------|------------|----------------------------|----------------|----------------|---------------|-------|-----------|-----------------|------------|----------------------|----------|
| Expense Upload    | Form       |                            |                |                |               |       |           |                 |            |                      |          |
| Please fill out a | formation  | l upload sup<br>When you a | porting docume | ntation for ea | ch line item. | Click | on the be | nefit detail li | ink for an | explanation of the b | enefit   |
| and policy in     | ionnation. | when you a                 | Cust           | tomer Relation | ns Team at 1- | 800-6 | 43-3766   | tions, piease   | contact u  | le corporate Relocat |          |
|                   |            |                            |                | Click          | Here for Hel  | 5     |           |                 |            |                      |          |
|                   |            |                            |                |                |               |       |           |                 |            |                      |          |
| Report 68795305   |            |                            |                |                |               |       |           |                 |            | Source: For          | m Entry  |
| P_port Name       |            | Submitted                  | Date Submit    | ted Amount     | Approved /    | Amou  | int Ch    | eck Number      | Status     | Print All Backup     | <b>)</b> |
| (select)          |            |                            | \$0.00         |                | \$0.00        |       |           |                 | New        |                      |          |
|                   |            | -                          |                |                |               |       |           |                 |            |                      |          |
| Expense Line 1    |            |                            |                |                |               |       |           |                 |            | Del                  | ete 🗌    |
| Benefit           |            |                            | Incurred Date  | Amount         |               | Тах   | Urgent    | Exception       | Status     | Upload Docs (0)      |          |
| (Select)          |            | ~                          |                | \$0.00         | USD           |       |           |                 | New        |                      |          |
| Reason for        |            |                            |                |                |               |       |           |                 |            |                      | ~        |
| Expense           |            |                            |                |                |               |       |           |                 |            |                      | $\sim$   |
| - Benefit Detail  |            |                            |                |                |               |       |           |                 |            |                      |          |
|                   |            |                            |                |                |               | _     |           |                 |            |                      |          |
| N                 | ew Expense | Line                       |                | Save           | and Finish La | te    |           |                 |            | Submit               |          |

- 3. Select the Benefit from the drop list that corresponds with the expense incurred.
- i.e. Pre-Move Meals
- 4. Fill out an Expense Line by selecting the corresponding Benefit from the dropdown. The benefit detail will display the policy and back up documentation needed to submit for reimbursement. The following fields are required. **Please Note: there should only be one expense line per benefit.** 
  - a. Incurred Date date you incurred the cost
  - b. Amount amount that you are asking to be reimbursed
  - c. Benefit worksheet some benefits will require additional information in order to submit. In this example, you enter the date you began and ended your trip. Total days will auto populate. Also enter the number of people on the trip including you.

| Please fill out all fields ar<br>and policy information<br>Customer Relations Team | nd upload supporting<br>When you are finis<br>at 1-800-643-3766 W | g documentation for ea<br>hed, click on Submit fo<br>almart's Accounts Paya | ch line item. Click on t<br>r approval. If you have<br>ble system will be perf | he benefit detail lin<br>questions, please c<br>forming scheduled i | nk for an expla<br>contact the Co<br>maintenance | anation of the ben<br>rporate Relocation<br>from 5/13 to 5/16. |
|--|---|---|--|---|--|--|
|  | mainte  | Click   | Here for Help  | nent processing.  |  |  |
| Report 68795303  |   |   |  |   |  | Source: Form   |
| Report Name  | Submitted Date  | Submitted Amount  | Approved Amount  | Check Number  | Status   | Print All Backup   |
| Pre Move Trip 🗸 🗸  |   | \$200.00  | \$0.00   |   | New  |  |
| Expense Expenses   | for my meals  |   |  |   |  |  |
| - Benefit Detail   |   |   | 2  |   |  |  |
| Daily limit \$40.00 per person   | for five days, limited to   | one trip for two people, as   | sociate and one hou Sid  | member. Required do   | cumentaion-1) R                                  | leceipts.  |
| Begin Date   |   |   | 5/1/2016   |   |  |  |
| End Date   |   |   | 5/5/2016   |   |  |  |
| Total Days   |   |   | 5  |   |  |  |
|  | e Move Trip includi   | ng self   | 1  |   |  |  |
|  | e Move Trin includi   | ng self   | 1  |   |  |  |

5. Click on "New Expense Line" to add additional lines in expense report.

| and policy in<br>Customer Relat | if fields and<br>formation.<br>ions Team a | When you ar<br>at 1-800-643-3 | e finis<br>766 W | hed, click of almart's A | tation for ea<br>on Submit fo<br>ccounts Pays | ach line item<br>or approval. I<br>able system<br>oht delay in r | f you h<br>will be | on the be<br>ave ques<br>performi<br>sement | nefit detail li<br>tions, please<br>ng scheduled<br>processing. | onk for an e<br>contact the<br>maintenar | xplanation of the benef<br>e Corporate Relocation<br>nce from 5/13 to 5/16. Th |
|---------------------------------|--|-------------------------------|------------------|--------------------------|---|--|--------------------|---|---|--|--|
|                                 |  |                               |                  |                          | Click   | Here for He  | lp                 |   | r   |  |  |
| Report 68795303                 | 6  |                               |                  |                          |   |  |                    |   |   |  | Source: Form En  |
| Report Name<br>Pre Move Trip    | ~  | Submitted                     | Date             | Submitte<br>\$200.00     | ed Amount                                     | Approved<br>\$0.00   | l Amoui            | nt Ch                                       | eck Number  | Status<br>Saved                          | Print All Backup   |
| Expense Line 1                  |  |                               |                  |                          |   |  |                    |   |   |  | Delete   |
| Benefit                         |  |                               | Incur            | red Date                 | Amount  |  | Tax                | Urgent                                      | Exception   | Status                                   | Upload Docs (3)  |
| Pre Move Meals                  | - 101.7                                    | ~                             | 6/3/2            | 2016                     | \$200.00                                      | USD  | $\checkmark$       |   |   | Saved                                    |  |
| Reason for<br>Expense           | Expenses f                                 | for my meals                  |                  |                          | -   |  |                    |   |   |  |  |
| Benefit Detail                  | -  |                               |                  |                          |   |  |                    |   |   |  |  |
| Daily limit \$40.0              | 0 per person f                             | for five days, ilm            | ited to          | one trip for             | two people, os                                | sociate and on   | e housel           | nold mem                                    | ber. Required d   | ocumentaian                              | -1) Receipts.  |
| Benefit Works                   | heet                                       |                               |                  |                          |   | E /1/2016  |                    |   |   |  |  |
| Segin Date                      |  |                               |                  |                          |   | 5/1/2010   |                    |   |   |  |  |
| End Date                        |  |                               |                  |                          |   | 5/5/2016   |                    |   |   |  |  |
| Total Days                      |  |                               |                  |                          |   | 5  | _                  |   |   |  |  |
| Number of Pe                    | eople on Pre                               | e Move Trip, I                | ncludi           | ng self                  |   | 1  |                    |   |   |  |  |

6. Click on save and finish later

| and policy in              | formation.   | When you a        | re finis  | hed, click   | on Submit fo   | r approval. If | you ha       | n the be<br>ve ques | tions, please    | contact the | E Corporate Relocation    |
|----------------------------|--------------|-------------------|-----------|--------------|----------------|----------------|--------------|---------------------|------------------|-------------|---------------------------|
| customer kelat             | ions ream    | at 1-000-045-     | mainte    | nance may    | counts Paya    | ht delay in r  | eimburs      | eriormi             | ng scheduled     | maintenai   | nce from 5/15 to 5/16. In |
|                            |              | 1                 |           |              | Click          | Here for Hel   | р            |                     |                  |             |                           |
| Report 68795303            |              |                   |           |              |                |                |              |                     |                  |             | Source: Form Ent          |
| Report Name                |              | Submitted         | Date      | Submitt      | ed Amount      | Approved       | Amoun        | t Ch                | eck Number       | Status      | Print All Backup          |
| Pre Move Trip              | ~            | _                 |           | \$200.00     |                | \$0.00         |              |                     |                  | Saved       |                           |
| Evnanca Lina 1             |              |                   |           |              |                |                |              |                     |                  |             |                           |
| expense tine i             |              |                   |           |              |                |                | -            |                     | -                | <b>.</b>    | Delete                    |
| Benefit                    |              |                   | Incu      | rred Date    | Amount         | -              | Tax          | Urgent              | Exception        | Status      | Upload Docs (3)           |
| Pre Move Meals             | - 101.7      | $\sim$            | 6/3/2     | 2016         | \$200.00       | USD            | $\checkmark$ |                     |                  | Saved       |                           |
| Reason for<br>Expense      | Expenses     | for my meal       | 5         |              |                |                |              |                     |                  |             |                           |
| Benefit Detail             |              |                   |           |              |                |                |              |                     |                  |             |                           |
| Daily limit \$40.0         | 0 per person | for five days, II | miteo' to | one trip for | two people, as | sociate and on | e hauseh     | old mem             | ber. Required de | ocumentaion | -1) Receipts.             |
| Benefit Works              | heet         |                   |           |              |                |                |              |                     |                  |             |                           |
| Begin Date                 |              |                   |           |              |                | 5/1/2016       |              |                     |                  |             |                           |
| End Date                   |              |                   |           |              |                | 5/5/2016       |              |                     |                  |             |                           |
| Total Days                 |              |                   |           |              |                | 5              | _            |                     |                  |             |                           |
| Number of P                | onle on Pr   | e Move Trin       | includi   | ng celf      |                | 1              | -            |                     |                  |             |                           |
| in an a contraction of the | opic officia | e more mp,        | meruun    | ing sell     |                | -              |              |                     |                  |             |                           |

### 7. Click on "Upload Docs".

| Expense Upload                                       | Form  |   |                                 |   |  |   |  |   |   |   |   |
|--|---|---|---------------------------------|---|--|---|--|---|---|---|---|
| Please fill out a<br>and policy ir<br>Customer Relat | all fields an<br>oformation.<br>ions Team a | d upload su<br>. When you<br>at 1-800-64: | are finis<br>3-3766 W<br>mainte | g documen<br>hed, click o<br>almart's Ao<br>nance may | tation for ea<br>on Submit fo<br>ccounts Paya<br>cause a slig<br>Click | ch line item<br>r approval. I<br>able system<br>tht delay in r<br>Here for He | Click o<br>f you ha<br>will be p<br>eimbur | n the be<br>ive ques<br>erformi<br>sement | nefit detail li<br>tions, please<br>ng scheduled<br>processing. | nk for an e<br>contact the<br>maintenar | xplanation of the benefit<br>corporate Relocation<br>nce from 5/13 to 5/16. Thi |
|  |   |   |                                 |   |  |   |  |   |   |   |   |
| Report 68795303                                      |   |   |                                 |   |  |   |  |   |   |   | Source: Form Entr   |
| Report Name  |   | Submitte                                  | d Date                          | Submitte  | ed Amount  | Approved  | Amour                                      | t Ch                                      | eck Number  | Status                                  | Print All Backup  |
| Pre Move Trip  | ~   | _   |                                 | \$200.00  |  | \$0.00  |  |   |   | New                                     |   |
| Expense Line 1                                       |   |   |                                 |   |  |   |  |   |   |   | Delete  |
| Benefit  |   |   | Incu                            | rred Date   | Amount   |   | Тах  | Urgent                                    | Exception   | Status                                  | Upload Docs (0)   |
| Pre Move Meals                                       | - 101.7                                     | ~   | 6/3/2                           | 2016  | \$200.00   | USD   | $\checkmark$                               |   |   | New                                     |   |
| Reason for<br>Expense                                | Expenses                                    | for my mea                                | ls                              |   |  |   |  |   |   |   | 4   |
| - Benefit Detail                                     | 1   |   |                                 |   |  |   |  |   |   |   | 49-04 - 1   |
| Daily limit \$40.0                                   | 0 per person j                              | for five days,                            | ilmited to                      | one trip for  | two people, as   | sociate and on  | e househ                                   | old memi                                  | ber. Required do  | ocumentaion-                            | 1) Receipts.  |
| <ul> <li>Benefit Works</li> </ul>                    | heet  |   |                                 |   |  |   |  |   |   |   |   |
| Begin Date   |   |   |                                 |   |  | 5/1/2016  |  |   |   |   |   |
| End Date   |   |   |                                 |   |  | 5/5/2016  |  |   |   |   |   |
| Total Days   |   |   |                                 |   |  | 5   |  |   |   |   |   |
| Number of P  | eople on Pre                                | e Move Trip                               | , includi                       | ng self   |  | 1   | _  |   |   |   |   |
|  |   |   |                                 | 0   |  |   |  |   |   |   |   |
|  |   |   |                                 |   |  |   | -  |   |   |   |   |

8. Click on "Upload New Document" in pop up window.

| Expense D  | ocumentation  |             | X      |
|------------|---------------|-------------|--------|
| Upload Do  | ocs Documents | ОК          | Cancel |
|            |               |             |        |
| File       | Date          | Description |        |
| Upload New | Document      |             |        |

9. Click on "Browse".

| Upload Documer  | ntation          |          |             |    | x      |
|-----------------|------------------|----------|-------------|----|--------|
| Upload Multiple | Documents        |          |             | ОК | Cancel |
| Browse          | $\triangleright$ |          |             |    |        |
| Title           | File             | Doc Type | Description |    | Delete |
|                 |                  | (select) | ✓           | 0  |        |

10. Hold down CTRL on keyboard to select more than 1 document. Click on "Open".

| <i>e</i> Select file(s) to | o upload by walm                            | art.qa.servicengine.com |   |  | <b>×</b>                                    |
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| Look in:                   | 👔 Test Files                                |                         | • | G 🌶 📂 🖽 -  |   |
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| Desktop<br>Libraries       |   |                         |   |  |   |
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|                            | File name:<br>Files of type:                | Allowed File Types      |   | •  | Open<br>Cancel                              |

Documents will be automatically uploaded into the screen. You can see the progress by the green bar underfile.

| Upload Documentation | on            |          |              |             |    |   | Х      |
|----------------------|---------------|----------|--------------|-------------|----|---|--------|
| Upload Multiple Docu | uments        |          |              |             | ОК |   | Cancel |
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| Browse               |               |          |              |             |    |   |        |
| Title                | File          | Doc Type |              | Description |    |   | Delete |
|                      | Receipt 1.txt | (select) | $\checkmark$ |             |    | 0 |        |
|                      | Receipt 2.txt | (select) | ~            |             |    | 0 |        |
|                      | Receipt 3.txt | (select) | ~            |             |    |   |        |

11. Select a document type that closely represents the document uploaded. For example, Pre-Move Meals you would select "Meal Receipt".

| Upload Document   | ation         |                       |             |            | x      |
|-------------------|---------------|-----------------------|-------------|------------|--------|
| Upload Multiple D | ocuments      |                       |             | ОК         | Cancel |
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| Receipt 2         | Receipt 2.txt | Itemized Meal Recei 🗸 |             | 0          |        |
| Receipt 3         | Receipt 3.txt | Itemized Meal Recei   |             | $\bigcirc$ |        |

#### 12. Click "OK".

| pload Docs Documents |          | ОК          | Cancel |
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| File                 | Date     | Description |        |
| Receipt 1            | 7/5/2016 |             |        |
| Receipt 2            | 7/5/2016 |             |        |
| Receipt 3            | 7/5/2016 |             |        |

### 13. Expense form will populate the number of documents uploaded into expense report.

| Expense Upload I<br>Please fill out a | Form<br>all fields and | upload sup        | porting     | documen       | tation fo | r each line item.   | Click on    | the benefit detail   | link for an e | xplanation of the ben  |
|---------------------------------------|------------------------|-------------------|-------------|---------------|-----------|---------------------|-------------|----------------------|---------------|------------------------|
| and policy in                         | formation.             | When you ar       | e finishe   | ed, click o   | on Submi  | it for approval. If | you have    | questions, please    | contact the   | e Corporate Relocation |
| Customer Relat                        | ions Team a            | t 1-800-643-3     | 766 Wal     | mart's Ad     | counts l  | Payable system v    | vill be per | forming schedule     | d maintenar   | nce from 5/13 to 5/16. |
|                                       |                        | n                 | naintena    | ance may      | cause a   | slight delay in re  | eimburse    | ment processing.     |               |                        |
|                                       |                        |                   |             |               | C         | lick Here for Hel   | р           |                      |               |                        |
| Report 68795303                       | 6                      |                   |             |               |           |                     |             |                      |               | Source: Form E         |
| Report Name                           |                        | Submitted         | Date        | Submitte      | ed Amou   | nt Approved         | Amount      | Check Number         | Status        | Print All Backup       |
| Pre Move Trip                         | $\sim$                 |                   |             | \$200.00      |           | \$0.00              |             |                      | Saved         |                        |
| Expense Line 1                        |                        |                   |             |               |           |                     |             |                      |               | Part                   |
| Renefit                               |                        |                   | Incurr      | ad Date       | Amoun     |                     | Tay II      | ment Exception       | Status        | Unload Doce (3)        |
| Denent Maria                          | 404 7                  |                   | C (2) (20   | tu Date       | Amoun     |                     |             |                      | Status        | opidad Docs (3)        |
| Pre Move Meals                        | - 101.7                | *                 | 6/3/20      | 16            | \$200.00  | USD USD             | ¥           |                      | Saved         |                        |
| Reason for<br>Expense                 | Expenses f             | or my meals       |             |               |           |                     |             |                      |               |                        |
| - Benefit Detail                      |                        |                   |             |               |           |                     |             |                      |               |                        |
| Daily limit \$40.0                    | 0 per person fi        | or five days, lin | nited to ai | ne trip for t | two peop/ | e, associate and on | e hausehold | d member. Required o | locumentaion  | -1) Receipts.          |
| <ul> <li>Benefit Works</li> </ul>     | heet                   |                   |             |               |           | 1                   | 100         |                      |               |                        |
| Begin Date                            |                        |                   |             |               |           | 5/1/2016            |             |                      |               |                        |
| End Date                              |                        |                   |             |               |           | 5/5/2016            |             |                      |               |                        |
| Total Days                            |                        |                   |             |               |           | 5                   |             |                      |               |                        |
|                                       |                        |                   |             | 1             |           |                     | -           |                      |               |                        |

14. Once complete click on "Submit".



Click on "Back to Main" or "Home".

### **MOBILE INSTRUCTIONS**

GAME is accessible from an internet browser on a mobile device. The link is <u>https://walmart.servicengine.com/mobi\_login.aspx</u>. That's an underscore between mobi and login.

Upon login into GAME, you will see your form menu to update GAME with your information.

As a relocating associate you are responsible for submitting all travel expenses in GAME, ie. Premove meals, final move mileage, etc. All other expenses need to be submitted to your relocation consultant. i.e. Renter One Month, U-Haul.

Please avoid using the native Back button on your mobile device. Use the Home button, Save and Return to Summary, and View Expense Main Page buttons to navigate through the Payment Information, Household Members, and Add Expense Report screens.

Walmart recommends having electronic versions of receipts or documentations available before entering a new expense report. Associates now can take a picture and upload it from a mobile device. Please note GAME allows the following electronic versions: txt, bmp, jpg, tif, pdf, tiff, jpeg, docx, msg, rtf, and doc.



- 1. Select "Expense Management" to navigate to your expense main screen.
- 2. Completing your payment information prior to submitting an expense report will ensure your relocation payments can be deposited directly to your bank account (rotate your device to see entire form).

3. To add a new expense, click on the "Add Expense Report" button.

|        |   | ••••• AT&T 穼      | 4:27 PM        | ∦ 88% | • | 6  | •••• AT&T |          | 4:29 PM               | * 87% <b>- 1</b> |
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|        |   |                   |                |       | 1 |    | Cancer    |          |                       | ,                |
|        |   | Cancel            |                |       |   |    | Save an   | d return | n to summary          | )                |
|        |   | $\langle \rangle$ |                | ) [   |   |    | Save an   | d add a  | New Line              | >                |

- 1. Select your report name keeping in mind that any non-travel relocation expenses will be submitted by your relocation consultant.
- 2. Click "Create Report" and wait for next screen to load.
- 3. Once screen has loaded your expense information:
  - a. Select travel "Benefit" used
  - b. Enter "Incurred Date"
  - c. Select "Urgent" if expense reimbursements are time-sensitive
  - "Exception" will be automatically checked if the same benefit has already been submitted or the benefit worksheet information indicates you're submitting for reimbursements outside of your relocation policy
  - e. Enter "Amount"
  - f. Enter "Reason for Expense"
  - g. Additional fields will appear in the "Benefit Worksheet" section based on the selected "Benefit"
  - h. "Upload Receipt" will allow you to use a photo in your device's photo library or take a picture of your receipt
  - i. Click "Save and return to summary"



- 1. Review report summary in this section.
- 2. Click "Submit Report" to send your report to the G-CRSS team for processing.
- 3. Click on "View Expense Main Page" to return to your expense management tab.