

Request for Reimbursement

Office Approval :

**FEDERATION OF STATE HUMANITIES COUNCILS**

1600 Wilson Blvd., Suite 902

**Arlington, VA 22209**

**703-908-9700**

TRAVEL: Includes lowest possible coach airfare; train; bus; car rental; taxi; parking; and tips related to travel.

MILEAGE: Reimbursed at \$.55.5 cents per mile (as of July 1, 2011)

MEALS: Costs must be incurred in direct connection with Federation business. Specify whether meal is breakfast, lunch or dinner.

Maximum allowance is \$10-breakfast, \$12-lunch, \$23-dinner /or \$45 maximum per day.

**ORIGINAL RECEIPTS ARE REQUIRED FOR ALL EXPENSES EXCEPT MILEAGE AND METRO FARES.**

DATE	Description/Purpose	Travel	Hotel	Meals	Misc.	TOTAL	Code
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
						\$ -	
All <b>original</b> receipts must be attached to this form.		Totals:	\$ -	\$ -	\$ -	\$ -	
		Sub-totals from back:	\$ -	\$ -	\$ -	\$ -	

Make check payable to:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

TOTAL EXPENSE:  
 AMOUNT DUE THE FEDERATION:  
 AMOUNT DUE YOU:

\$	-
\$	-

AMOUNT CONTRIBUTED:

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I verify that the information on this form is true and correct:  
 (Payment will NOT be made without a signature.)

Signature \_\_\_\_\_

