EXCHANGE
EXCHANGE CLUB OF ROME, GA

EXPENSE REIMBURSEMENT REPORT

Name _____ **Date Submitted** _____

Title _____

Period _____ **Please Print Clearly** **Authorized by** _____

Per Mile Reimbursement _____

Total Reimbursement Due _____ **I have paid these expenses** _____

Paid Receipts Must Be Attached To This Form To Be Reimbursed ***(Signature Of Member Requesting Payment)***

Date	**Description of Expense Purpose of Travel**	**Expense Category** ***(Treasurer Use)***	**Airfare**	**Lodging**	**Ground Transportation** (Gas, Rental Car, Taxi)	**Meals**	**Conference Fees**	**Office supplies & miscellaneous**	**Miles** (Personal Car Only)	**Mileage Reimbursement**	**Total**
							Total Mileage Reimbursement:				

INSTRUCTIONS FOR PREPARATION OF EXPENSE REIMBURSEMENT REPORT

GENERAL:

1. This report must be completed by the ***individual*** who incurred the expense.
2. A statement of the Exchange purpose of the expenditures must be included in the description section.
3. All documentation including receipts must be submitted and will be retrained by the Club.

SPECIFIC POLICIES:

1. Transportation:
 a. The most cost effective means of transportation is to be used.
 b. Automobile travel will be reimbursed at current IRS rates.
 c. Air travel should be approved by the Board of Directors **In advance**.
2. Hotel:
 a. Cost of room plus tax of the individual reporting. *Paid receipt indicating date and room cost must be submitted.*
3. Meals:
 a. Meal cost plus tax of individual reporting. *Meal costs, including tip, must be substantiated by a paid receipt.*

4. Miscellaneous:
 a. Each item of miscellaneous expense must be entered on the report. *Paid receipts must be submitted for each item.*

NON-REIMBURSABLE TRAVEL EXPENSES:

1. The following expenses will not be reimbursed:
 a. Personal entertainment.
 b. Fines for parking or traffic violations.
 c. Charges for alcoholic beverages.
 d. Other expenses of a personal nature.