

# EXPENSE REIMBURSEMENT/DONATION REQUEST

Montana-Northern Wyoming Conference UCC, 2016 Alderson Avenue – Billings, Montana 59102

Please attach receipts for actual spent on food, lodging and any itemized expenses; receipts of gas not required.

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY/STATE/ZIP \_\_\_\_\_

MEETING TYPE, DATE, PLACE \_\_\_\_\_

## TRAVEL, FOOD, LODGING AND OTHER EXPENSES

CAR – allowance is \$.14 per mile

# of Miles: \_\_\_\_\_

Actual Spent

Allowed

\$ \_\_\_\_\_

\$ \_\_\_\_\_

MEALS – allowance is \$10 per meal or lesser actual spent on meals

\$ \_\_\_\_\_

\$ \_\_\_\_\_

LODGING – allowance \$60 per night or lesser actual spent on lodging

\$ \_\_\_\_\_

\$ \_\_\_\_\_

OTHER – itemize \_\_\_\_\_

\$ \_\_\_\_\_

OTHER – itemize \_\_\_\_\_

\$ \_\_\_\_\_

OTHER – itemize \_\_\_\_\_

\$ \_\_\_\_\_

Camp Manger/Conference Approval: \_\_\_\_\_

Date: \_\_\_\_\_

REIMBURSEMENT CONTRIBUTED TO CONFERENCE

\$ \_\_\_\_\_

TOTAL REIMBURSEMENT DUE

\$ \_\_\_\_\_

Check here to acknowledge a Conference contribution of unreimbursed expenses. You may contribute the full amount spent as a Conference donation, or donate the difference of the amount spent minus the allowable reimbursement.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_