

EXPENSE REIMBURSEMENT

Requestor's Name		Date Submitted	
Reimbursing Organization		Address to send the check to:	

For RAILS Staff, please attach all receipts for expenses to this form and submit it to your supervisor for approval. Once approved, please submit this form to accounting@railibraries.org

For RAILS Board and Committee Members, please attach all receipts for expenses to this form and submit it to stacy.palmisano@railibraries.org

For Finance Use Only	Fund	Location	Department	Program code	GL Account:					
					In state	5247	5248		5249	5250
					Out of state		5258	5257	5259	5260

Travel Expenses											
Date of Expense	Conference / Meeting / Reason for Travel	City, State for Conference / Meeting / Location	From: City, State	To: City, State	Miles	Mileage Reimb.	Meals	Airfare	Lodging	Parking, Tolls, Transit, etc.	Notes
						Travel Totals:					

Other Reimbursements (Non-Travel) - Including Memberships, Conference Registration Fees, Supplies, etc.		
Date	Description	Amount
Other Totals:		
Total to be Reimbursed:		

- To facilitate reimbursements, we request that submitters please:
- Attach all receipts to this document.
 - Fill out a separate reimbursement form for each conference / event.
 - Enter meals by day and include detailed receipts. If you are in a group, please request separate receipts, if possible.
 - Note if you are missing a receipt.
 - For RAILS staff, please turn in reimbursement requests as incurred, but at least monthly.
 - For RAILS board and committee members, please turn in reimbursement requests at or above \$15 as incurred, or at least quarterly.
 - Please submit all reimbursement requests for expenses incurred during the fiscal year no later than 10 days after the fiscal year-end (July 10).

Requestor Name and Signature	
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Approver Name and Signature	
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