

## Expense Reimbursement Voucher

330 John Carlyle St., Suite 200, Alexandria, VA 22314

Name:	ime:		Purpose of Trip:		Amount Paid By Traveler:	
ddress:				Less Advanc	e/Personal Exp: (	
			Balance Due Traveler:			
			Balance Due From Trave		e From Traveler:	
'oday's Date:						
Travel Dates:				Total Charged to NCOPE (directly)	Total Paid By Traveler	
Plane/T						
Auto (.5	4.5)					
Taxi/M	etro					
Parking	/Tolls					
Hotel						
Breakfas	st					
Lunch						
Dinner						
Tips						
Other						
Persona Deducti						
Totals =	=					

This expense voucher is designed to reimburse for actual allowable expenses paid out on official accreditation/association business. The items composing allowable expenses are listed below. This voucher does not constitute a legal document for tax purposes.

- 1. **Plane, train, etc**: Actual cost at coach rate to go by most direct route. If different routes or schedules are used, enter most direct route cost. Please take advantage of advance-purchase and other discounts whenever possible.
- 2. **Personal auto:** Auto mileage reimbursable for business at .53.5 per mile.
- 3. **Rental car, taxi, or metro**: Travel to and from business related function. Utilize the least costly, yet timely mode of ground transportation.
- 4. **Parking and tolls:** Reimbursable for expenses incurred for business related functions.
- 5. **Hotel-Motel:** Actual billed costs (room/tax). Do not include other charges that are itemized elsewhere. If spouse accompanies traveler, list single room rates or deduct 1/3 from base room rate. \*\*\*Movies/telephone are not reimbursable costs.\*\*\*
- 6. **Meals:** List meals, plus tips. Maximum authorized for breakfast, lunch and dinner is \$50.00 per day. \*\* This amount includes beverages. In the event the meal allotment is exceeded without explanation, the matter will be referred to NCOPE's Treasurer.
- 7. **Tips**: Tips for baggage service (doorman, bellboys, porter, etc) will be limited to \$1.00 for initial bag and \$.50 for each additional piece. The maximum for cabs and meals is 20%.
- 8. Other: Items not specifically identified above.

## When completing this form, please adhere to the following guidelines:

- 1. The purpose of trip must be explicit to allow for proper allocation of expenses.
- 2. List separate entries for each occasion on which expenses have occurred.
- 3. Attach receipts for all expenditures. **Receipts are mandatory.**
- 4. List names of any other persons who are included in your meal charges, noting their business connection or eligibility for meal reimbursement.
- 5. All expenses submitted that are over the authorized amount will require the approval of NCOPE's Treasurer, if not accompanied by exception documentation.
- 6. **Vouchers must be submitted with 30 days** of expenditure to be eligible for reimbursement. NCOPE's executive director must approve vouchers received after 30 days.
- 7. Please explain below any unusual expenses such as specific committee expenses or expenses incurred for other than self:

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	<del></del>
Please allow up to 4 weeks for processing of reimbursement. Thank you!	<del></del>
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