BSA Troop 39

Mattituck, NY

Travel Reimbursement Form

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Check #:	
Date:	
Amt:	
√given to:	

DEADLINE STRICTLY ENFORCED:

This Form along with original receipts for fees/fuel must be submitted to the Committee Treasurer within TWO WEEKS following the outing to receive reimbursement.

рате:		-
		Toll
Name:		Toll
		Toll
Address:		Toll
		Fuel
Trip Name:		
Trip Dates:		Total
Trip Mileage:	\$ Amount:	
·To receive reimbursement for fe	es (tolls, parking, other), receipts m	ust be provided.

- •To receive reimbursement for fuel, all original receipts must be provided. Original receipts include (1)tare receipt (fill up just prior to start of trip), (2)all receipts during the trip, and (3)receipt for fill up immediately following return from the trip.
- •If no receipts, fuel reimbursement will be determined by the following formula: Avg. gas price X round-trip mileage X 0.08 (8%). Mileage and gas price determined by Treasurer per Troop 39 Travel Reimbursement Policy.