## Carolinas Region, EGA Expense Reimbursement

The form on the next page should be used to request expense reimbursement for activities performed on behalf of the Carolinas Region by region officials and certain others.

The last page is the "Expense Reimbursement Log." It can be provided instead of receipts to request reimbursement of **single** expenses of **\$25.00** or **less**. The log can be used alone, or in conjunction with the "Request for Expense Reimbursement Form".

\*Both forms are in table format so can be filled in on your computer. Save the blank form to your computer and then fill it out. Use the tab button to move from space to space. The spaces with zeros (0.00) will automatically populate with the correct numbers when you use the calculation formulas below the form and on the second page. Save a copy using the date of your request as part of the file name. You may want to delete this page before saving as well as whichever of the forms you don't use.

To identify whether a particular expenditure is eligible for reimbursement, Consult the Carolinas Region's Policies & Procedures, or contact the region director or treasurer: regiondirector@egacarolinas.org, or treasurer@egacarolinas.org.

Mail the completed, signed, and dated form(s) to the Carolinas Region treasurer, along with appropriate receipts. Or, you can email scanned attachments of your signed/dated form and receipts are acceptable.

Send the completed form with your receipts as an email attachment to the Carolinas Region treasurer at: treasurer@egacarolinas.org.

DO NOT USE EITHER FORM for requesting payments to teachers.



## **Request for Expense Reimbursement**

Name	Position					
	print	or type				
Address						
Tuno	street	A ma a um t		city	state	Zip
Type		Amount			Purpose	
Supplies	_					
Telephone	_					
Postage	<del>-</del>					
Hotel	<u>-</u>		_			
Per diem (from belo	w) _					
Transportation						
	Air					
Mileag	e (from below)		<del></del> -			
548	· -					
Other	transportation					
Photocopying	_		_			
From log	<del>-</del>					
Other	_					
TOTAL	\$ _		_			
	Mileage Reim	bursement (	Calculation (i	insert resul	t above)	
Total mile	es driven		x	Per mile	e = \$	
		contact treasurer	for current rate			
	Per Di	iem Calculati	on (insert re	sult above)	)	
Tota	l days	Х	\$ F	Per day =	\$	
1014		^ _	<u> </u>	c. aa,	<u> </u>	
Please use this for	m when requestin	g reimbursem	ent for expen	ses from Car	olinas Region, EGA	•
•	arterly to the region	•	•			
• .			ed log of post	tage, telepho	one, photocopying,	parking, and
4. Requests for a giv	be attached instea en vear must be re	•	treasurer no l	ater than De	cember 2 of the ve	ar in which the
expense is incurre	•	derved by the	ti casarer iro i	ater than be	cember 2 or the ye	ar iii wiiicii cii
•	reimbursement wil			_		
		n 14 days of re	ceipt of the re	equest by the	e treasurer, provide	ed that all
documentation is			-li Di	f-II /-	la a alc a sa a Vi	
I wish to donate a port			_	•	-	
□ 100%	□\$	(fill in	amount)	□ None		
	ai.	nature				date
	SIE	mature				uale



## **Expense Reimbursement Log**

This form can be provided instead of receipts to request reimbursement of single expenses of \$25.00 or less. It can be used alone, or in conjunction with the "Request for Expense Reimbursement Form".

Name		Position				
	pr	int or type				
Address						
	street	city state	Zip			
Phone	Date	Purpose	Amount			
_		Total Phase				
		Total Phone				
Postage	Date	Purpose	Amount			
	Total Postage					
Dhotoconvina	Data	Dumasa	Amount			
Photocopying	Date	Purpose	Amount			
-						
-						
	Total Photocopying					
		тоситтюсосорушу				
Parking	Date	Purpose	Amount			
	Total Parking					
Tolls	Date	Purpose	Amount			
	1	Total Tolls				
1		GRAND TOTAL				
		of all items from above.*				
	•	t for Expense Reimbursement Form" on previous page if you ar you wish to donate a portion of your reimbursement to the regi				
		signature	date			