

School Nutrition Association Iowa
Travel Expense Claim Form

Name _____ Address _____

City _____ IA _____ Phone (____) _____

Meeting _____ Location _____ Board Position _____

PREPAID EXPENSES (By SNAI Credit Card or already reimbursed by SNAI)

Airline Tickets \$ _____	Paid by _____	or SNAI Credit Card	Date _____
Registration \$ _____	Paid by _____	or SNAI Credit Card	Date _____
Hotel Deposit \$ _____	Paid by _____	or SNAI Credit Card	Date _____
Meal Advance \$ _____			Date _____

TRAVEL

Meeting Dates: _____ Departure Date: _____ Return Date: _____

Travel Expenses to be paid upon returning home. Submit within 2 weeks of the event. **Meal total should include tip.**

Date	Breakfast	Lunch	Dinner	Taxi, Parking, Mass Transportation	Hotel	Misc. Expenses	Daily Total
							\$
							\$
							\$
							\$
							\$
							\$
							\$

Automobile Round Trip Mileage _____ miles X **\$.36** mile = _____ \$

Airline Tickets \$ _____

Registration \$ _____

GRAND TOTAL \$ _____

List all items paid by Association Credit Card by date and amount:

Date	Item	Amount Charged	Date	Item	Amount Charged
		\$			\$
		\$			\$
		\$			\$

GRAND TOTAL OF ASSOCIATION CREDIT CARD CHARGES \$ _____

Explanations	Grand Total	\$ _____
Roomed with _____	Deduct: Hotel deposit	\$ _____
Rode with _____	Deduct: Meal Advance	\$ _____
	Deduct Amount charged to Association Credit Card	\$ _____

Other information: Explain shared meals, tips, miscellaneous expenses, etc. **Amount to be reimbursed** \$ _____

I verify this claim includes all reimbursable expenses for this trip.

Requestor /Committee Chair Signature _____ Date _____

Account Number _____

Date Paid _____ Check # _____

Approval Signature _____ Date _____

Please Mail To:
Julie Hauser
SNAI Secretary/Treasurer
221 West Main Street
Solon, IA 52333

TRAVEL REIMBURSEMENT PROCEDURES

GENERAL DIRECTIONS

Member is responsible for retaining a copy of the claim and the documentation.

Complete name, address and all other information as requested.

Expense form must be completed by member, approved by committee chair (if necessary) and signed by the treasure or president.

All expenses for the same trip must be reported on the same travel expense form.

All required original receipts must be attached to this form. (Charge card slips are NOT acceptable receipts. You must have an itemized receipt.)

All trip expenses must be itemized.

Non-reimbursable personal expenses include, but are not limited to, recreation and/or entertainment expenses including transportation expenses, personal phone calls, alcoholic beverages and additional room costs for family members.

PREPAID AMOUNTS:

The only travel costs that can be paid prior to the trip are:

Airline ticket – Attach a copy of the itinerary with ticket amount.

Registration – Attach a copy of the registration form which includes the amount of the registration fee.

Hotel deposit – When required to guarantee the first night's lodging, written confirmation must be obtained. This includes the daily room rate and the amount of deposit required. You must request a receipt for the hotel deposit paid.

Meal advance – You may request up to \$65.00 per day for a meal advance for out-of-state travel. This amount will be deducted from the meal expenses claimed on the reimbursement form. Attach a copy of the agenda showing meal functions paid with registration and include receipts for meals purchased while traveling.

Taxi advance – Must be approved by the Executive Committee. Receipts required on return home.

DAILY TRIP EXPENSES

Meals - The following amounts are allowed for meals up to and including tips: Actual amounts will be reimbursed with receipts

In-State - Breakfast	\$ 5.00	Out-of-State – Breakfast	\$ 10.00
Lunch	\$ 10.00	Lunch	\$ 20.00
Dinner	\$ 20.00	Dinner	\$ 35.00

Guidelines for claiming meals – If you have to leave home prior to 7 am to arrive at the meeting on time, you may claim breakfast. When meetings are held over the noon hour, a meal will be reimbursed if not provided by association. When driving directly home after a meeting and your arrival time is after 6 pm, a dinner meal is an allowable expense. Receipts are required with all meal reimbursement requests. If a meal is included in the registration fee or paid by the association, no reimbursement will be provided for the meal. Please note these meals on the form by writing "provided" in the allotted space.

Lodging - Requires a detailed hotel bill, which shows the name and address of the hotel, dates of lodging and charges for each night. Other reimbursable expenses included in the hotel bill require a written explanation.

Travel – Car rental for association related business requires detailed receipts and may not be reimbursable. Car rental insurance should be waived. Car rental insurance is covered by SNAI insurance. Ground transportation to hotel, airport, restaurant, or other Association function requires a receipt. Mileage for your personal vehicle will be reimbursed at the approved rate of \$.36 per mile as set by the Board. If using a school district car, the Association will reimburse the school district at the district rate once a document is presented to the Association. Circle personal car or district car on the Travel Expense Claim Form. If you did not get prepaid for the airfare, then turn in a travel agent invoice or itinerary with ticket amount.

Telephone calls related to Association business will be reimbursed. Must be itemized and have a receipt.

Registration – If you paid the registration fee and have not been reimbursed include it on the appropriate section on the form. Include a copy of the registration form and your receipt.

Other miscellaneous charges, such as luggage fees and parking, must be itemized with a receipt. SNAI will pay for one personal luggage charge. Luggage required for transporting SNAI material will be reimbursed with a receipt.

Please include explanation for any unusual circumstances, i.e. no hotel - stayed with family, and for other expected costs that are not included.