

# Committee Meeting Travel Expense Report Form

NOTE: Please submit this form to the Conference Treasurer as soon as possible after your meeting. Reimbursement checks are generally prepared only twice a month. Please list all committees attended during each trip. Thank you for your willingness to participate in the governance of your church.

Name of Committee	Committee Date	Round-trip Mileage	Per Diem	Lodging	<b><u>OFFICE USE ONLY</u></b>		
					Mileage Amt	Total	Account

I request reimbursement as listed above.

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
City State Zip

**Rates for 2017**

Mileage is reimbursed at 40 cents per mile. Per Diem is paid at \$ 24.00 per half day and \$ 48.00 per full day.  
Lodging (if necessary) will be reimbursed at 100%. Please attach the bill. 1/1/16