

POLICIES AND PROCEDURES

SUBJECT

APPENDIX B Travel and Miscellaneous Expense Report

INDEX NO.	APPROVAL LEVEL			
2031/B	GB			
EFFECTIVE	SUPERSEDES			
1/2025	1/2024			

SPECIAL DISTRIBUTION
Committee Members

-	THE WAY	-
6	4	M
1	Oscure	
		~

	NAME	_ DATE				
	TITLE/POSITION				SSN	
3.	REASON FOR TRIP/EXPENSE					
١.	EXPENSES INCURRED FROM			to		
		mm/dd/yy	hh:mm		mm/dd/yy	hh:mm
5.	TRAVEL EXPENSES	CAR MILEAGE @ .70 RECREATIONAL VEHICLE	<u>a)</u>		_ (Attach MapQ	uest)
		MILEAGE @1.40	_b)		_ (Attach MapQ	uest)
		MEAL EXPENSES	_c)		_	
		AIR FARE	_d)		-	
		AIRPORT PARKING	_e)		=	
		TAXI, SHUTTLES, TIPS	_f)		_	
		RENTAL CAR	_g)		_	
		LODGING	_h)		_	
		RALLYFEE	_i)		=	
		CAMPGROUND FEE				
			_k)		-	
6.	OTHER EXPENSES	POSTAGE			-	
		OFFICE SUPPLIES	50			
			n)		-	
7. 8.	EXPLANATIONS	GRAND TOTAL	<u>\$</u>			
e	ENSE JUSTIFICATION WORKS	- FET		**		
	FROM					
	FROM Address		Departure date		Departure Time	
	Address		Departure date		Departure Time	
		Zip Code	Departure date Arrival date		Departure Time Arrival Time	
	TO Address	Zip Code				
	Address	Zip Code Zip Code				
	TO Address RETURN/TO Address	Zip Code Zip Code	Arrival date		Arrival Time	
	TO Address RETURN/TO	Zip Code Zip Code S Zip Code	Arrival date		Arrival Time	TOTAL FRVA MILES
LE	TO Address RETURN/TO Address RETURN/TO Address	Zip Code Zip Code S Zip Code Zip Code	Arrival date Return date		Arrival Time Return Time	TOTAL FRVA MILES
LE	TO Address RETURN/TO Address RETURN/TO	Zip Code Zip Code S Zip Code Zip Code	Arrival date Return date Return date		Arrival Time Return Time	TOTAL FRVA MILES

Continued on reverse side..

Travel and Miscellaneous Expense Report

2031/B

INSTRUCTIONS

- Type or print in black ink. DO NOT use pencil or colored ink.
- Use worksheet areas for calculation.
- Sign form when complete.
- Any expenses must be accompanied with a receipt.
- Mail completed form with receipts to:

Family RV Association ATTN: Accounting Dept 8291 CLOUGH PIKE CINCINNATI OH 45244-2796

FAX EXPENSE FORMS TO 513-474-2332

- If Chapter or Area Rally visit, give name of Chapter or Area If attending Executive Board Meeting, give sub committee

 - If attending training or seminar, give reason
- If miscellaneous travel or inter-city office travel, give reason

Brian Bacik - extension #237

bbacik@fmca.com

- If attending Miscellaneous Committee Meetings, name
- 4. Enter time of day and date you left home/office/previous destination and return time and date
- Enter total from mileage worksheet. Mileage should be actual odometer reading from departure to arrival at destination by car or recreational vehicle or mileage by car to and from airport. Current IRS rate is \$.70 per mile for automobile.

Meal expense is at the rate of up to \$68.00 per day. Lodging and meal per diem is \$247.00 in cities designated high cost and \$178.00 in all other cities. Receipts are required.

6. Postage, Office Supplies and Telephone are allowable expenses, but not charged against a National Officer's individual budget.

MEAL EXPENSES WORKSHEET – Week One								
DATES	1 1	1 1	1 1	1 1	I - I	1 1	1 1	TOTAL
Breakfast \$16.00								
Lunch \$19.00								
Dinner \$33.00								
Total \$68.00								

Week One - MEAL EXPENSES TOTAL

MEAL EXPENSES WORKSHEET – Week Two								
DATES	1 1	1 1	1 1	1 1	1 1	1 1	1 1	TOTAL
Breakfast \$16.00								
Lunch \$19.00								
Dinner \$33.00								
Total \$68.00								

Week Two	O - MEAL EXE	PENSES TOTA	AL

TOTAL MEAL EXPENSES _

Receipts are required for reimbursement.	
SIGNATURE	DATE



AD17-01/25