| <b>Association of California School Administrators</b>      |
|---|
| 1575 Bayshore Highway, Burlingame CA 94010                  |
| Phone (800) 608-2272, Financial Services Fax (650) 259-1029 |



# TRAVEL EXPENSE CLAIM – FY 2010-11

| Check                       | Here If New Ad                   | dress                     |                        |         |          |   |                        |
|-----------------------------|----------------------------------|---------------------------|------------------------|---------|----------|---|------------------------|
| Payable to (Print)<br>First |                                  |                           | Middle Last            |         |          |   | -                      |
|                             | dress                            |                           |                        |         |          | S.S.N. (Only Required if                | Honorarium is Included |
| City                        |                                  |                           |                        |         |          | Zip                                     |                        |
|                             |                                  |                           |                        |         |          |   |                        |
|                             | of Meeting                       |                           |                        |         |          |   |                        |
| Regular Committee           |                                  |                           | Special Funding Activi |         | Activity | v Number                                |                        |
| DATE                        | HONORARIUM<br>(Professional Fee) | MILEAGE<br>(50¢ per mile) | AIR*                   | MEALS * | HOTEL*   | SURFACE TRAVEL*<br>(Parking, Taxi, etc) | OTHER*                 |
|                             |                                  | Miles x 50¢ =             |                        |         |          |   |                        |
|                             |                                  | Miles x 50¢ =             |                        |         |          |   |                        |
|                             |                                  | Miles x 50¢ =             |                        |         |          |   |                        |
|                             |                                  | Miles x 50¢ =             |                        |         |          |   |                        |
|                             |                                  | Miles x 50¢ =             |                        |         |          |   |                        |
|                             |                                  | Miles x 50¢ =             |                        |         |          |   |                        |
|                             |                                  | Miles x 50¢ =             |                        |         |          |   |                        |
| Sub-<br>Totals              |                                  |                           |                        |         |          |   |                        |

TOTAL OF REIMBURSEMENT REQUEST

### \$\_\_\_\_

### (\*NO REIMBURSEMENT FOR THESE CATEGORIES WITHOUT ATTACHED RECEIPTS)

I hereby certify that the above is a true statement of travel expenses incurred by me in accordance with the current expense policy of ACSA and that all items shown were for official business of the association and that no expenses herein claimed were received or paid from other sources.

| Signature<br>(Claim must be signed before it can be processed) | Date |
|--|------|
| Approval of Chairperson (or Coordinator)                       | Date |
| Approval of Committee Staff Liaison                            | Date |
|  |      |

SEE REVERSE FOR FILING INSTRUCTIONS

# TRAVEL EXPENSE CLAIM INSTRUCTIONS

- **GENERAL** This form is to be used by individuals traveling on ACSA business. In order to expedite your claim, please follow the steps below:
  - 1) Sign the expense claim after completing form and attaching receipts.
  - 2) Submit for approval to the committee chair/ council president immediately after each trip.
  - 3) The chair/ president will then forward the claim to ACSA's Business Office in Burlingame.
  - 4) Out-of-state travel must be **approved in writing** in advance by the **Executive Director before** any out-of-pocket expenses will be reimbursed.
  - 5) Prior to submitting, retain a copy for your records

All expense claims should be submitted within five working days from the time incurred in order to be reimbursed on a timely basis. Expense claims for all other ACSA business must be approved by the appropriate individual before submitting to the Business Office for reimbursement.

# RECEIPTS FOR ALL EXPENSES <u>MUST</u> BE ATTACHED TO THE EXPENSE VOUCHER

AIR TRAVEL Using the Internet is an excellent way to obtain reduced airfares and some airlines give extra flight credits for making online reservations. Some websites to investigate are travelocity.com, lowestfare.com, travelzoo.com, and also the individual carrier websites such as iflyswa.com (Southwest Airlines). ACSA will reimburse. *Please book your reservation 3 weeks in advance in order to obtain the lowest fare.* 

- **MILEAGE** As a matter of policy, the use of common carrier is encouraged. If it is impractical to travel via common carrier, personal automobile mileage will be reimbursed at the approved mileage allowance.
- LODGING Normally, committee/ council meetings are scheduled so that members can arrive at the meeting and return in one day. <u>Reimbursement for overnight hotel accommodations is authorized</u> only if the meeting is more than one day or if travel arrangements necessitate staying overnight. Please attach all receipts.
- MEALS While traveling on ACSA business, <u>reasonable</u> expenses for meals will be reimbursed. All receipts must be attached.
- OTHER For incidentals such as, postage; bridge tolls and gratuities other than for meals, receipts for \$25 or more are required. An explanation must be provided on the expense report as to the nature of the expense.

### PERSONAL EXPENSES WILL NOT BE REIMBURSED