



MEMBER CLAIM FOR REIMBURSEMENT OF TRAVEL-RELATED & MISCELLANEOUS EXPENSES

Purpose and use: To allow **eligible NARFE members** to file a claim for reimbursement of expenses related to their official duties, and/or as an invited attendee at a NARFE New York State Federation authorized event. **Please print clearly.**

Member name (please print full name):		NARFE Member ID #:
Member mailing address:		
Primary phone #:	Primary email address (<i>do not use an official government email address</i>)	
Purpose of travel (for example: "Annual Meeting" or "Board Meeting"):		
<p>I am claiming reimbursement for the following (check all that apply):</p> <p><input type="checkbox"/> Mileage to and from the event (mileage must total more than 120 miles round trip). Reimbursement is based on the standard IRS rate.</p> <p><input type="checkbox"/> Reimbursement for commercial carrier to and from the event (receipts for commercial carrier required).</p> <p><input type="checkbox"/> Reimbursement of expenses <u>other than mileage</u>, such as tolls, taxi, parking, lodging, and/or meals (receipts for items of more than \$25 required).</p> <p><input type="checkbox"/> For use by NARFE New York board members only, reimbursement of expenses related to my official duties.</p>		
Itemize expenses below; use reverse side if additional space is needed.		
Item 1:	Amount claimed:	
Item 2:	Amount claimed:	
Item 3:	Amount claimed:	
Total amount claimed:		

*I hereby certify that I am a member of NARFE, and that the above claims are true and correct. The amounts claimed were necessary and were incurred in the performance of my official duties **and/or** are related to my travel to and from a NARFE New York State Federation authorized event. **Please add any additional comments here:***

Your signature: _____ **Date:** _____

Please submit to the Federation President/Treasurer.

For use by NARFE New York State Federation	
Amount approved:	
Signature of Approving Officer:	
Signature/Initials of Treasurer:	
Budget line Item:	
Check # Issued:	Date:
Check Amount:	