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San Francisco Community College Federation of Teachers, Local 2121

311 Miramar Avenue ▪ San Francisco, CA 94112 ▪ 415-585-2121 ▪ fax: 415-585-4305 ▪ email:aft@aft2121.org ▪ www.aft2121.org

Reimbursement Plan for Parking Garage on 21st St.
across from Mission Campus for Fall 2012 and Spring 2013
Submit by May 24, 2013

Who is Eligible

- Under the AFT/District contract faculty is eligible for partial reimbursement of your 2012/13 parking fees at the **Parking Garage on 21st St.** incurred while teaching at the Mission Campus.

- Faculty members are eligible to have up to 50% of their parking costs reimbursed until the fund is depleted.

- If there are not sufficient funds to pay for a 50% reimbursement, each faculty member participating in the program will receive the same (lesser) percentage reimbursement.

- A committee composed of union reps, faculty and one administrator, will review the submitted requests at the end of the semester and determine the amounts to be reimbursed. MISSION CAMPUS VOLUNTEERS ARE NEEDED TO HANDLE THE REIMBURSEMENT REQUESTS.

How and When to Submit Requests

- Only receipts for parking on assigned working days during the time the faculty member is actually working at the Mission Campus will be eligible for reimbursement.

- You must list your teaching hours and submit receipts in **chronological order** for those hours.

- Submit your receipts to your AFT rep at Mission, no later than Friday, May 24 at 5p.m.

- **We encourage you to list your receipts on an electronic Excel spreadsheet that will automatically calculate the totals and save you a lot of time,** available at www.aft2121.org or call AFT at 585-2121.

- Alternatively you may list your receipts on the attached forms and calculate the total manually.

- You must include your signature on the form. Be sure to keep a copy of your submitted form and receipts for your records.

Name: _____ Faculty I.D. #: _____

Address: _____ Telephone #: _____

Teaching Schedule

<div style="text-align:right">Assignment Dates
(If other than semester-long)</div>

Class 1:	_____ am/pm	_____ am/pm	M	T	W	R	F	S	S	_____
Class 2:	_____ am/pm	_____ am/pm	M	T	W	R	F	S	S	_____
Class 3:	_____ am/pm	_____ am/pm	M	T	W	R	F	S	S	_____
Class 4:	_____ am/pm	_____ am/pm	M	T	W	R	F	S	S	_____
Class 5:	_____ am/pm	_____ am/pm	M	T	W	R	F	S	S	_____
Class 6:	_____ am/pm	_____ am/pm	M	T	W	R	F	S	S	_____

I hereby certify that I incurred the following parking charges at the **Public Parking Garage on 21st St.** in association with my scheduled teaching assignment. The relevant receipts are attached.

Signature_____ Date_____

Hourly Parking (list in chronological order)

Date:	Scheduled Work Hours		Time on Receipt		Amount on Receipt
_____	_____ am/pm	_____ am/pm	_____ am/pm	_____ am/pm	_____
_____	_____ am/pm	_____ am/pm	_____ am/pm	_____ am/pm	_____
_____	_____ am/pm	_____ am/pm	_____ am/pm	_____ am/pm	_____
_____	_____ am/pm	_____ am/pm	_____ am/pm	_____ am/pm	_____
_____	_____ am/pm	_____ am/pm	_____ am/pm	_____ am/pm	_____
_____	_____ am/pm	_____ am/pm	_____ am/pm	_____ am/pm	_____
_____	_____ am/pm	_____ am/pm	_____ am/pm	_____ am/pm	_____
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_____	_____ am/pm	_____ am/pm	_____ am/pm	_____ am/pm	_____
_____	_____ am/pm	_____ am/pm	_____ am/pm	_____ am/pm	_____
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_____	_____ am/pm	_____ am/pm	_____ am/pm	_____ am/pm	_____
_____	_____ am/pm	_____ am/pm	_____ am/pm	_____ am/pm	_____

Total $_____