# FFA REIMBURSEMENT FORM

Name	Title	SS# _	
Home Address	City	State NV	Zip
Agency	Destination _		
Purpose of Travel			
If dates and/or times do not match airline itinerary, please explain:			
Departure Date Departure	Time Return	n Date Arri	ival Time
Departure Date Departure Time Return Date Arrival Time Mo/Day/Year  TRAVEL EXPENSES (See reverse side for limitations and requirements)			
1. Airfare (Must Return Travelers Portion of Airline Ticket regardless of Self or Agency paid)			
From To	Paid I	Зу	Cost
		(Self or Agency)	
2. <u>Auto</u>			
From To	Total N	Miles	Cost
		(One way or R/T)	
3. Other Travel Expenses - Taxi, Parking.			
			Cost
Item Description			Cost
4. Registration Fee (Must have receipts, 1	may not include membership fe	es)	Cost
(	<b>,F</b>	/	
5. Meals and Lodging (Only expenses not covered by registration fee)(refer t reverse side for Time Limitations)			
breakfast @ \$5.50 each	=		
lunch @ \$6.50 each	=		
dinner @ \$14.00 each (in state	e) =		
night lodging @ \$43.00/night		<del></del>	
night lodging @ \$60.00/night	· · · · · · · · · · · · · · · · · · ·	Total Meals & Lodging	g Cost
CLAIMANT SIGNATURE TOTAL THIS CLAIM \$			
FFA State Director Approval		L CLAIM APPROVED	

## PLEASE SHADED AREA FFA USE ONLY

<u>Please Note</u>: This reimbursement form must be returned within 15 days after travel is completed. Claims submitted after the 15 day period will not be honored. Information regarding reimbursement limits and allowable expenses is given in detail on the reverse side of this form. Please read carefully. Upon completion, please return along with all necessary receipts to:

FFA State Director Workforce Education Nevada Department of Education 700 East Fifth Street Carson City, Nevada 89701-5096

#### REIMBURSEMENT POLICIES

#### **SPECIAL NOTES**

<u>No receipts are required</u> for meals. When individuals receive meals as part of their airfare or when the meals are provided as a result of a registration fee, <u>no reimbursement is allowed for that particular meal</u>. A copy of the agenda is required.

If the out-of-state lodging cost exceeds the rates listed above, please notify the Workforce Education office prior to your departure.

<u>Original receipts are required to be returned to this office</u> for lodging (out-of-state only), conference registration, commercial parking, taxi, limousine service and the <u>passenger receipt of the airline ticket</u> (regardless of prepaid ticket). **Tickletless airline travel will not be allowed through FFA.** 

## **MILEAGE**

Mileage for both In State and Out of State travel will be reimbursed at 20 cents per mile\*.

\*If airline travel (economy class only) is less expensive than the approved mileage rate (20 cents) to a particular destination, then the individual will be reimbursed at the airfare amount in lieu of the more expensive mileage amount.

# REIMBURSEMENT RATES

Persons on travel status are entitled to reimbursement for the following items at the State-approved reimbursement rates:

\$ 5.50 Breakfast

\$ 6.50 Lunch

\$ 14.00 In-State Dinner

\$43.00 In-state Lodging (no receipt required)

\$60.00 Out-of-state Lodging (receipt required)

#### **TIME LIMITATIONS**

Persons start travel status on or prior to 6:30 a.m.

Persons start travel status on or prior to 11:30 a.m.

Persons start travel status on or prior to 5:30 p.m.

Receive breakfast
Receive lunch
Receive dinner

Persons terminating travel status on or after 7:30 a.m. Receive breakfast Persons terminating travel status on or after 1:30 p.m. Receive lunch Persons terminating travel status on or after 6:30 p.m. Receive dinner