



Gallery Workshop Reimbursement Form

NCTM Regional Conference & Exposition
Atlantic City, NJ
October 19-21, 2011

Name _____

Address _____

Session Number _____ Day _____ Time _____

Room _____ Capacity _____

Workshop and Gallery Workshop Speakers are expected to provide material for participants and will be reimbursed for the cost of these handouts to the maximum amount calculated below. **Only the lead speaker listed for the presentation can request a reimbursement.** All reimbursements will be made after the conference. No requests will be processed without the original receipts. Requests should be submitted to the NCTM headquarters no later than **November 21, 2011.**

Gallery Workshop reimbursement (\$2.00 per participant up to seating capacity*)

*Please refer to the capacities and room set section on the Regional Conferences Speaker Page to compute your workshop or gallery workshop maximum reimbursement amount.

Please itemize! Receipts must be attached for single expenditures that exceed \$10.00.

_____	\$ _____
_____	\$ _____
_____	\$ _____
	\$ _____ TOTAL

Signature _____

Please return the completed form with receipts by **November 21, 2011 to:**

Conference Services
NCTM
1906 Association Drive
Reston, VA 20191-1502

NCTM Use Only:

Voucher _____

Date: _____

Invoice Date: _____

Description: _____

Amount: _____

Account: 1-8200-000-015-7760

Approval / Date: _____