



1801 NW 80th Blvd. Gainesville, FL 32606 (352)372-9551
COMMITTEE MEETINGS, CONSULTANT and BOD MEMBERS
 (Expense Allowances on Back)

Please complete ALL sections of the box and submit to Finance OR email to dmahoney@fhsaa.org:

Name _____ Date Submitted: _____
 Address _____ City _____ State _____ Zip _____
 Work Phone _____ Home Phone _____ Email _____
 Purpose of Trip/Destination _____
 Mode of Transportation: (check one) Drove auto____; Rode with someone____; Air Flight____ (attach receipt)
 Did you have Road Tolls (turnpike, etc)? Yes____ No____
 DEPART Home: Date: _____ Time: _____M RETURN Home (estimate): Date: _____ Time: _____M
Special Considerations/Comments (please make note of any special circumstances you need considered in calculating your reimbursement for this trip - if left blank, all policy applications will be applied - see reverse side of form)

 I hereby certify that above information is accurate and should be used in calculating travel expenses due to me for the performance official duties in connection with the FHSAA; and this claim is complete, true and correct in every material matter.
 Submitted By (Signature) _____ May submit electronically, send form by email from your email address to dmahoney@fhsaa.org. Type "signature confirmation by email" on this line, OR apply electronic signature image if available.

STOP - TRAVELER DOES NOT COMPLETE anything below this line --- For FHSAA Staff ONLY - Calculation Worksheet:

Transportation: **** The most economical method of travel will be reimbursed.**
Reimbursement based on the LESSER of (see instructions on reverse side):
 Round Trip Auto Miles _____ @ 44.5 cents (based on Google maps) \$ _____
OR
 Car Rental Allowance
 \$30 x _____ Days; Plus _____ Round Trip Miles @ 15.5 cents \$ _____
 Vicinity (Local) Auto Miles 10 miles @ 44.5 cents (max allowed) \$4.45

Meals: BASED ON DEPARTURE & RETURN TIMES ABOVE

| | Travel time must be | | Capped Amt | Day 1 | Day 2 | Day 3 | Day 4 | Day 5 | |
|---------|---------------------|----------|---------------|-------|-------|-------|-------|-------|----------|
| | Before | to After | | | | | | | |
| Brkfst* | 6:00AM | 8:00AM | \$ 6.00 | _____ | _____ | _____ | _____ | _____ | |
| Lunch* | 12NOON | 2:00PM | \$ 11.00 | _____ | _____ | _____ | _____ | _____ | |
| Dinner* | 6:00PM | 8:00PM | \$ 19.00 | _____ | _____ | _____ | _____ | _____ | |
| | | | \$ 36.00 | | | | | | \$ _____ |

*If any meals are provided by hotel or FHSAA, mark as "COMP", zero reimbursement

Other Expenses:

Tolls - per Sun Pass website (If marked "Yes" above) \$ _____
 Miscellaneous: (Specify) _____ \$ _____

TOTAL EXPENSE REIMBURSEMENT DUE \$ _____

Calculation Worksheet Prepared By _____ Authorized By (Executive Director or Designee) _____ Date Authorized _____

| Fund | Dept | Func | GL Code | Prog |
|------|------|------|---------|------|
| | | | | |

**FHSAA TRAVEL REIMBURSEMENT POLICY FOR
COMMITTEE MEETINGS, CONSULTANT AND BOD MEMBERS**

MEALS

An allowance for meals is paid based on **Florida Statute 112.061 - Travel expenses of public officers, employees and authorized persons**. Meal allowance is calculated in the following manner:

- *Breakfast provided if traveling before 6:00am-until after 8:00am
- *Lunch provided if traveling before 12noon-until after 2:00pm
- *Dinner provided if traveling before 6:00pm-until after 8:00pm

Departure and return sections of the travel voucher reimbursement form must be completed in order to receive the meals allowance. Meals provided by the hotel (i.e. breakfast) or by FHSAA cannot be claimed.

HOTEL

If traveling more than 300 round trip miles, hotel accommodations for most committee meetings are arranged by FHSAA, must be preapproved, and are directly paid by FHSAA. If a traveler stays at a hotel other than the designated FHSAA hotel, the room will be reimbursed at the FHSAA corporate rate paid for that event if prior approval was obtained from the FHSAA. **Travelers are required to provide a hotel receipt to document the stay in order to receive reimbursement if staying at a hotel other than the FHSAA designated hotel. If hotel arrangements are not preapproved and arranged by the FHSAA, you will NOT be eligible for reimbursement.**

MILEAGE

The FHSAA shall designate the most efficient and economical means of travel for each trip. Mileage is reimbursed at the current State of Florida rate or car rental rate (see below), whichever is LESS. Mileage is allowed from departure city to destination city. If traveling more than 150 round trip miles and duration is no more than two days, the rental car allowance is the preferred method even if the traveler drives a personal owned vehicle (see "Car Rental Allowance"). Vicinity mileage (for local travel to and from hotel) is reimbursed at the current State of Florida rate and may not exceed 10 miles.

CAR RENTAL ALLOWANCE

Rental of a vehicle in lieu of use of personal vehicle is encouraged when traveling more than 150 round trip miles and no more than two days since the cost of travel for the rental plus gasoline is less than the standard State of Florida mileage rate. **Travelers who prefer to drive their own vehicle will be paid for mileage reimbursement at the FHSAA rental cost plus allowance for round trip miles or the State of Florida mileage rate, whichever is LESS.** Enterprise Leasing has a pricing agreement with FHSAA of \$30 per day by referring to contract #43A7322. Total Rental Car Allowance is \$30 per day plus an allowance per mile for gasoline. You will not have to furnish a receipt and the reimbursement will be calculated for you. This rate includes insurance. In addition, Enterprise fees may be reimbursed with a copy of the receipt.

SPECIAL CONSIDERATION POLICIES

Exceptions due to special circumstances of the following expense allowances are not automatically given. They must be noted in comment section of form; receipts are required. These special circumstances must be approved by the Executive Director.

1. Hotel other than FHSAA designated hotel
2. Airfare or other common carrier

***** DEADLINE FOR SUBMISSION**

Travel reimbursement vouchers will be processed within 10 days of receipt. **Vouchers submitted later than 45 days from the date of travel will not be reimbursed.** Any exceptions due to extenuating circumstances must be approved by the Executive Director.