

Check box if total amount is to be donated to CMC-North

Revised 7/8/11

Ck number _____
Date sent _____
Amount _____

**California Mathematics Council
Northern Section
Fall Conference Speaker Reimbursement Form
2011**

- Please bring this form with you to the CMC – North Fall Conference Dec. 2– Dec. 4, 2011
- Personal Information - Readable Please

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Email: _____

Session(s) Number(s) _____

Transportation – Actual cost

Airplane _____ Car Rental _____ Parking/Tolls _____

Taxi _____ Other Travel Costs _____ Explain: _____

Mileage:

Total Miles Driven: _____ (50¢/mile) _____ Round trip (Claim) [] Yes [] No

From City _____ to City _____ License Plate: _____

Total Transportation – Actual Cost _____ Amount Claim _____

Lodging - Speaker only Actual Cost _____ Amount Claim _____

[] Check if stayed on grounds

Speaker Materials: # of receipts _____ Actual Cost _____ Amount Claim _____

**** Speakers staying on grounds do not have to submit lodging receipts.

Receipts and **proof of payment**, in **speaker's name** are required for all expenses claimed. Be sure to follow the **Receipts For Expenses Requirements** on the reverse side.

Total Actual Expenses _____

DATE: _____

Total Reimbursement Claimed _____

Signature: _____

NO REIMBURSEMENTS WILL BE MADE AFTER JANUARY 24, 2012

Mail to: Chris Tsuji
CMC-N Treasurer
670 Choctaw Drive
San Jose, CA 95123

Forms that are incomplete, improper receipts or not signed, will be mailed after January 10, 2012.
Please enclose a stamped, self-addressed envelope for your reimbursement.

Questions: ctsuji@cheerful.com

Reimbursement for CMC members only.

How much can I claim?

- If you did **one** presentation and are traveling **within** California you may claim up to **\$350** in total expenses. The maximum expenses are as follows:
Lodging: \$175; Travel: \$125; Supplies: \$50
- If you did **one** presentation and are traveling from **outside** California you may claim up to **\$450** in total expenses. The maximum expenses are as follows:
Lodging: \$200; Travel: \$200; Supplies: \$50
- For an additional presentation, you may claim an additional \$50 for either supplies, or lodging, or travel. Please specify on form.

Receipts for Expenses Requirements

You may claim travel, lodging, supplies, and copying expenses as long as itemized receipts are submitted for the **SPEAKER ONLY**. *Meals and gas cannot be claimed.*

Receipts and **proof of payment**, in **speaker's name** are required for all expenses claimed.

All receipts should indicate what was obtained/services rendered, name of company/store, date. CONFIRMATION RECEIPTS AND CREDIT CARD RECEIPTS ARE NOT ACCEPTABLE.

Receipts for expenses for lodging, transportation paid by credit card must show services rendered, your name, the completed transaction (showing a 0 balance), the business name, dates service rendered, the credit card type and the last 4 digits of the credit card number. **The total amount paid must be circled.**

Other receipts for expenses paid by **credit card** must indicate what was obtained, date expenses made, show your name, show 'Paid by Credit Card', or you may record 'Paid by Credit Card' on the receipt, and initial it, the business name, the credit card type and the last 4 digits of the credit card number. **The total amount paid must be circled.**

Receipts for expenses paid by **personal check** must indicate what was obtained, show 'Paid by Check,' or you may record "Paid by Check" and the check number on the receipt, and initial it. The business name must be on the receipt and date expense occurred, or you may record the business name and date expenses made, and initial it. **The total amount paid must be circled.**

Receipts for expenses paid by **cash** must indicate what was obtained, show 'Paid in Cash' or you may record "Paid in Cash" on the receipt and initial it. The business name and date expense made must be on the receipt or you may record the business name, and date and initial it. **The total amount paid must be circled.**

Any expense that does not follow the above will not be reimbursed.

Please attach receipts behind this sheet.