

ACVP

AMERICAN COLLEGE OF
VETERINARY PATHOLOGISTS



Volunteer Expense Report Form

Invoice Number: _____

Date: _____

Name: _____

Street: _____

Apt./Ste.: _____

City: _____

State: _____

Zip: _____

Phone: _____

Purpose: _____

Date									Subtotal
Transportation (air, train, bus)									
Auto @ \$0.725 per mile (enter number of miles)									
Parking									
Taxi/Limousine									
Lodging									
Breakfast									
Lunch									
Dinner									
Registration Fee									
Miscellaneous (specify below)									

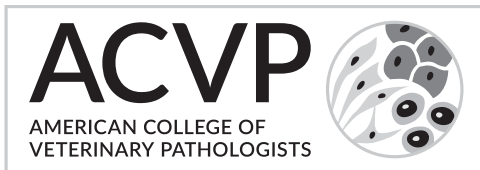
Grand Total: _____

Miscellaneous expenses: _____

Paid receipts MUST be attached before reimbursement will be made. E-mail this form to the ACVP Administrator and attach scanned copies of receipts. Save a copy for your records. A copy of the expense report will NOT be returned with the reimbursement.

I certify that these expenses were incurred by me in fulfilling my official, delegated ACVP duties. Personal expenses have been excluded.

E-Signature: _____



Expense Guidelines

All requests for reimbursement must be reported on an Expense Report and submitted to ACVP headquarters within 30 days.

Receipts must be attached to the Volunteer Expense Report. In lieu of receipts for expenditures under \$20, an explanatory note must be attached. Unverified expenditures will be deducted from total reimbursement.

Whenever practical, the most economical class and most direct route will be used for travel. Reservations for air travel must be made, when possible, 30 days in advance of travel. Reimbursement, when traveling by private car, will be at the rate paid in accordance with current federal guidelines.

Speakers may refer to their contracts for specific reimbursement information.