

**REIMBURSEMENT SHALL BE MADE FOR REASONABLE OUT-OF-POCKET EXPENSE. IT IS NOT THE INTENT TO KEEP MEMBERS WHOLE.**

| DATE                 | LOCATION | 1<br>TRANSPORTATION | 2<br>LODGING | 3<br>MEALS | 4<br>OTHER | TOTAL<br>EXPENSES | IDENTIFY BY TYPE<br>ALL ITEMS IN COL 4, "OTHER" |
|----------------------|----------|---------------------|--------------|------------|------------|-------------------|---|
|                      |          |                     |              |            |            |                   |   |
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|                      |          |                     |              |            |            |                   |   |
|                      |          |                     |              |            |            |                   |   |
|                      |          |                     |              |            |            |                   |   |
| <b>TOTAL EXPENSE</b> |          |                     |              |            |            |                   |   |

| Mileage Calculation - Enter Miles | Miles | Rate | Amount | DATE PAID | CHECK # |
|-----------------------------------|-------|------|--------|-----------|---------|
|                                   |       |      |        |           |         |

|   |  |  |   |  |
|---|--|--|---|--|
| <b>SUMMARIZE EXPENSES BELOW OR CHECK ONE:</b> |  | <input type="checkbox"/> Mid Year Meeting<br><input type="checkbox"/> Annual Meeting | This is a correct report of expenses incurred: Input dates below<br><b>DATES FROM:</b> _____ <b>To:</b> _____ |  |
| POSTAGE                                       |  |  | PRINT NAME  |  |
| REPRODUCTION                                  |  |  | ASSOCIATION POSITION/CHAPTER NAME   |  |
| MISCELLANEOUS                                 |  |  | MAILING ADDRESS   |  |
| TRAVEL  |  |  | CITY, STATE, ZIP  |  |
| NEW CHAPTER / SOCIAL GROUP DEVELOPMENT        |  |  | YOUR SIGNATURE  |  |
| AREA MEETING EXPENSES                         |  |  | DATE  |  |
| TELEPHONE                                     |  |  | APPROVAL SIGNATURE  |  |
| <b>TOTAL EXPENSES</b>                         |  |  | DATE  |  |

**CHAPTER PRESIDENTS SEND REPORTS TO AREA VICE PRESIDENT. OFFICERS, CHAIRS, PAST PRESIDENTS SEND TO TREASURER.**

**GENERAL INSTRUCTIONS - CRA 165**

Issued

1. Prepare report for all CRA expenses. Please complete online or print using ink.
2. Report the actual expenses and **attach supporting receipts**.
3. There is a limit on the combined meals and other costs (columns 3 and 4) of \$60.00 perday.
4. Total operating (**NOT** Mid-year or Annual Meeting) expenses should be summarized by classifications in the lower left section on page 1.
5. If expenses incurred at a Mid-year or Annual Meeting, check where indicated.

**COLUMN 1 - TRANSPORTATION**

1. **Travel by Air**
  - A. Personal car mileage, shuttle or taxi from residence to and from airport.
  - B. Shuttle, taxi or other public transportation to and from airport to meeting place.
  - C. Roundtrip air, bus or train fare (the most economical class available), senior coupons, etc  
**Note:** Trial program: if Spouse/1st Guest<sup>a</sup> is attending, the cost of 2 round-trip most economical class available fares will be entered in Column 1.
2. **Travel by Personal Car** (Use Calculation box below)
  - A. Personal car mileage to and from residence (via the most direct route) and the meeting place, plus tolls enroute, will be reimbursed at the current rate per mile\*, if the cost is lower than the most economical airfare.  
**Note:** Trial program: if Spouse/1st Guest<sup>a</sup> is attending, the cost of 2 round-trip most economical class available fares will be entered in Line 1. The mileage driven is not doubled for Spouse/1st Guest<sup>a</sup> when attending.
3. **Parking**
  - A. Reasonable parking costs at transportation facility or hotel.

**COLUMN 2 - LODGING**

1. Enter only the single rate for lodging, or the special rate given to CRA, plus all taxes in this column.  
**Note:** Enroute lodging and parking are not reimbursable.

**COLUMN 3 - MEALS**

1. Enter the cost of [the Director/Alternate/Fellowship Program participant](#) meals (including tips) up to a maximum of \$60 .  
**Note:** Meals (including tips) may be claimed for day of arrival at and day of departure from the meeting place.

**COLUMN 4 - MISCELLANEOUS**

1. Enter only miscellaneous items in this column. Bellboy/maid tips, telephone, reproduction, postage, etc. Explain in the upper right-hand column, page 1.

| <b><u>IF PERSONAL CAR IS USED</u></b>                                    |       |                  |   |
|--|-------|------------------|---|
| 1. MOST ECONOMICAL CLASS AVAILABLE AIRFARE -----                         |       |                  | = _____   |
| MILEAGE TO AND FROM AIRPORT -----  | _____ | miles @          | = _____   |
| SHUTTLE, TAXI, ETC. TO AND FROM HOTEL -----                              |       |                  | = _____   |
| AIRPORT PARKING -----  | _____ | days @           | = _____   |
|  |       | <b>(1) TOTAL</b> | = _____   |
| 2. ROUNDTrip AUTO MILES DRIVEN -----                                     | _____ | miles @          | = _____   |
| TOLLS ENROUTE -----  |       |                  | = _____   |
|  |       | <b>(2) TOTAL</b> | = _____   |
| <b>ENTER THE LESSER OF (1) OR (2) ABOVE IN COLUMN 1 – TRANSPORTATION</b> |       |                  | <div style="border: 1px solid black; width: 100px; height: 20px; display: inline-block;"></div> |

**Note:** Column 1, items 1C and 2A -Spouse/1st Guest<sup>a</sup> - (partner, significant other, family member, friend, caregiver, etc.)

\* The mileage rate will fluctuate and the Treasurer will advise when the IRS adjustments are announced. Please use the rate in effect when expense incurred