

The RGS Travel Expense Reimbursement Form

Name: _____ Mailing Address: _____

For what meeting are you requesting reimbursement? _____

Meeting Date: _____ Meeting Location: _____

Trip Origin (if different from above): _____

Trip Destination (if different from above): _____

Auto miles	x \$0.56	Tolls	Parking	Car Rental
Air/Train carrier	Date purchased	Shuttle	Taxi	TRAVEL
Hotel name	# of nights	x rate		ACCOMMODATION
Breakfast	Lunch	Dinner		MEAL
TOTAL COST				

Choice of Reimbursement (please check one)

Please issue me a check in the amount of the expenses I have indicated above.

In lieu of expense reimbursement, I wish to claim my travel expenses as a contribution to The Respect Institute, Inc. Please send me an acknowledgement of this gift, in the amount indicated above, for my tax records. I understand that this contribution is tax-deductible to the fullest extent allowed by law.

I would like to contribute \$_____ of my expenses as a donation and have the rest reimbursed.

Signature: _____

Date: _____

Note: ALL receipts must be submitted along with this form.