

FORM 7 REQUEST FOR REIMBURSEMENT AMERICAN ACCOUNTING ASSOCIATION

	Description	Amount
Travel:	Airfare _____	<input style="width: 100%;" type="text"/>
	Taxi/Limo _____	<input style="width: 100%;" type="text"/>
	Car Rental _____	<input style="width: 100%;" type="text"/>
	Mileage (use current IRS rate) _____	<input style="width: 100%;" type="text"/>
	Parking _____	<input style="width: 100%;" type="text"/>
Hotel:	Sleeping Room _____	<input style="width: 100%;" type="text"/>
	Meeting Room _____	<input style="width: 100%;" type="text"/>
	Audiovisual _____	<input style="width: 100%;" type="text"/>
	Banquet Services _____	<input style="width: 100%;" type="text"/>
Meals & Incidentals (max. \$40 per day):	_____	<input style="width: 100%;" type="text"/>
List travel dates	_____	<input style="width: 100%;" type="text"/>
	_____	<input style="width: 100%;" type="text"/>
	_____	<input style="width: 100%;" type="text"/>
	_____	<input style="width: 100%;" type="text"/>
Services:	Printing/copying _____	<input style="width: 100%;" type="text"/>
	Mailing _____	<input style="width: 100%;" type="text"/>
	Fees _____	<input style="width: 100%;" type="text"/>
	Telephone (AAA related) _____	<input style="width: 100%;" type="text"/>
Awards:	_____	<input style="width: 100%;" type="text"/>
Other:	_____	<input style="width: 100%;" type="text"/>
Total Amount Requested:		<input style="width: 100%; border: 2px solid black;" type="text"/>
Event or other reason for reimbursement:		

Make check payable to: (PLEASE INCLUDE FULL NAME AND CURRENT MAILING ADDRESS)		

Signature _____	Date _____	
Authorization _____	Date _____	
Submit to: Roland LaTulip American Accounting Association 5717 Bessie Drive Sarasota, FL 34233-2399		<input type="checkbox"/> In lieu of a check, please send me a receipt for a tax-deductible contribution of this amount.

American Accounting Association Reimbursement Policy

- A. No reimbursement is allowed for travel expenses to attend the AAA Annual Meeting, except for housing and meals for the days preceding or following the four convention days, necessitated by authorized committee meetings.
- B. Meals and incidentals will be reimbursed for their actual cost up to a maximum of \$40 daily. However, if group meals are provided, the maximum will be reduced by \$10 for breakfast, \$10 for lunch and \$20 for dinner. No receipts required.
- C. Hotel charges for room and taxes only are reimbursed at actual cost. Detailed receipt must be provided.
- D. Air and other public transportation are reimbursed at lowest available fare (premiums paid for business or first-class airfares are not reimbursable. Itinerary change fees will be reimbursed only with written statement indicating reason the change was unavoidable, or the change resulted in a lower fare. Receipt showing amount and flight information must be provided.
- E. No reimbursement is allowed for extra travel insurance. The association covers all members and staff traveling for the AAA under a \$100,000 accidental death and dismemberment policy.
- F. Mileage is paid at the 2010 IRS rate. (50 cents per business mile driven.) Long-distance driving will be reimbursed at the lower mileage or lowest coach airfare.
- G. Travel plans should be made more than two weeks prior to departure to avoid full-price airfares.