

Texas VFW Reimbursement Form

Name						Title								
Address														
					Dep / Rtn	Rate	Non Tvl	\$55 Non Tvl	Lodging	Round Trip	Mileage	Misc	Total	
Dep Date	Rtn Date	Place & Reason for Trip			Days	\$41.25	Overnights	Per Diem	Expenses	Miles	@\$.60	Expenses	Expenses	
Trip Information (Each row represents one trip; up to five trips can be listed per form) Dep Date: Enter the start date of your trip. Rtn Date: Enter the return date of your trip. Place & Reason for Trip: Describe the destination and purpose of the trip. Expense Details Dep / Rtn Days: List the number of overnight stays for the trip. The form allows for noting the first and last days if travel involves staying overnight. If visiting multiple locations, note as '1'. Rate \$41.25: This rate is applicable for the first and last days of travel. Automatically calculated if applicable. Non Tvl Overnights: Enter the number of non-travel overnights during the trip. \$55 Non Tvl Per Diem: Enter the amount calculated as \$55.00 per non-travel overnight. Lodging Expenses: Input the total cost of lodging, with the itemized receipt "required". Round Trip Miles: List the total round-trip mileage from your house and back. For multiple destinations in one trip, list the complete route. Mile Misc Expenses: List any additional expenses with detailed itemization and business purpose required. Use the back of the form for detailed descriptions including who, what, and when. Calculate total miles multiplied by \$0.60 for vehicle travel, or input the cost of airfare here. Other Key Points All original detailed/itemized receipts must accompany this request. List one trip per line, with no more than five trips per form. Keep a copy of the form for your records. The form must be submitted within 30 days of the first event date.											Subtotal			
											Deductions			
											Date		Total	
											Signature			
State QM Approval Signature														
Notes:														