

Semcac Head Start
This Institution is an Equal Opportunity Provider
Policy Council Expense Reimbursement Form

Mileage Reimbursement

I hereby declare that I traveled from _____ to _____ and returning to _____ on _____ (date). The purpose of the trip was _____.

Odometer readings: Beginning: _____ Ending: _____

Total miles: _____ Mileage reimbursement request at IRS Rate: \$ _____ = \$ _____

Child Care Reimbursement

Number of children: _____ Birth date(s): _____

Time: Beginning at _____ Ending at _____ Date: _____

Child care reimbursement request: \$ _____

Connectivity Compensation

_____ \$10 per meeting in which I fully participated.

Other Reimbursement

(Attach original receipt(s) to request form)

Date: _____ Description: _____ Amount: \$ _____

Total Reimbursement Requested: \$ _____

Name (Print): _____ Date: _____

Address: _____ Telephone: _____

* _____ *

I hereby declare that the above mentioned claim is just and true, and that the money therein charged was actually paid for the purpose stated. Mileage reimbursement submitted is for miles driven by my vehicle or for the actual transportation expense (whichever is lower). Child care expense is for my legally qualified dependent(s). I also declare that in all cases no part of such claim has been paid by another source. I understand that false information on this form may be cause for removal from the Board of Directors based on Section 4.9.B. of the Semcac Bylaws.

Signature: _____ Date: _____

Authorized Approval Signature: _____ Date: _____

FOR OFFICE USE ONLY							
Invoice #:		Amount Due:		Fiscal Approval:			
Invoice Date:		Vendor ID:					
<u>P</u>	<u>F</u>	<u>A</u>	<u>L</u>	<u>O</u>	<u>R-E</u>	<u>Amount</u>	<u>Description</u>
H S A		210	999	6520	1-9999		Policy Council participation
					1-9999		
					1-9999		

GUIDELINES FOR COMPLETING THE EXPENSE REIMBURSEMENT FORM

General Guidelines

- The Expense Reimbursement Form needs to be completed in its entirety for reimbursement.
- The Expense Reimbursement Form should be submitted monthly.
- Forms authorized by the Executive Director prior to noon on Wednesday will be paid during that week's cash disbursement cycle (checks are mailed on Friday). Forms received after noon on Wednesday are paid out during the next week's cash disbursement cycle.
- The board member and the Executive Director are responsible for the accuracy and completeness of the Expense Reimbursement Form. Incomplete Expense Reimbursement Forms shall be returned to the board member.
- The signatures of the board member and Executive Director imply joint agreement with the expenses stated on the Expense Reimbursement Form.

Mileage Reimbursement Guidelines

- The most cost effective method of travel should be utilized by board members.
- Privately owned vehicles used for Semcac business will be reimbursed according to the prevailing IRS rate, which includes the cost of fuel, standard vehicle maintenance, and insurance coverage.
- The following information needs to be documented:
 - Date of travel
 - Nature and purpose of travel
 - Beginning and ending odometer readings
 - Number of miles driven or reimbursable
 - Insurance coverage statements checked

Child Care Reimbursement

- Child care reimbursement will be made for qualified children age 12 or under and children over age 12 with a disability.
- The child care reimbursement rate is \$4.00 per hour for one child and \$8.00 per hour for two or more children, up to a maximum of \$60.00 per day. Reimbursement will follow the current Head Start rate.

Other Reimbursements

- Board members may be reimbursed for other expenses to include telephone or parking, providing that a receipt is attached to the Expense Reimbursement Form.
- Telephone: Phone calls from a board member's personal phone will be reimbursed at actual cost upon submission of a copy of the telephone record.
- Meals (per Fiscal Policies): Semcac shall pay the actual cost of meals, not to exceed local standard per diem daily rates, including tips, when on Agency business outside the Agency's and/or program's service area or while attending business-related meetings that occur over a mealtime or when attending an all-day training/conference.
 1. To be eligible for breakfast reimbursement while on Agency travel to attend a conference or training, the member must need to leave prior to 6:00 a.m. To be eligible for dinner allowance while returning from a conference/training, the member must be unable to reach home prior to 6:00 p.m.
 2. Semcac shall pay the billed rate for meals when provided as part of a seminar or conference.
 3. No alcoholic beverages will be reimbursed by the agency.
 4. The receipt must be itemized to show what was paid for.
 5. Include individuals represented at the meeting and purpose.