

# INTERNATIONALLY FUNDED VISIT TO CHARTERED CHAPTER

(Send original to international headquarters. Keep a copy for regional files.)

Chapter Name \_\_\_\_\_

Region # \_\_\_\_\_ Date of Visit \_\_\_\_\_

Director's Name \_\_\_\_\_ President's Name \_\_\_\_\_

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Ground Transportation From \_\_\_\_\_ To \_\_\_\_\_

Total Miles \_\_\_\_\_ Total Kilometers \_\_\_\_\_

Current mileage reimbursement rate is \$.55/mile. Kilometers will be converted to miles.

Tolls/parking U.S. currency \$ \_\_\_\_\_ Other currency \$ \_\_\_\_\_

Total to be reimbursed (mileage + tolls/parking) = \_\_\_\_\_

Air Transportation Via  World Travel (prepaid) or  
 Other travel agency at a cost of \$ \_\_\_\_\_

This visit was made by \_\_\_\_\_

<p>MAKE CHECK PAYABLE TO AND MAIL TO:</p> <p>Name of Region: _____</p> <p>Finance Coordinator Name: _____</p> <p>FC Address: _____</p> <p>_____</p>
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Visit Approved by \_\_\_\_\_ Date \_\_\_\_\_

Education Coordinator or  Membership Coordinator

*For Headquarters use only:* Reimbursement Approved by \_\_\_\_\_

Date \_\_\_\_\_

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