

North Central Land & Water Conservation Association

Travel / Per Diem Reimbursement Form

| |
|--|
| Date Pd: <u> </u> / <u> </u> / <u> </u> |
| Check #: <u> </u> |

Name: _____ Submittal Date: / /

Purpose of Travel: _____

| LODGING | | | | | |
|-----------------------------|--------|-----------|-------------|-----------|-------|
| Date: | Hotel: | Location: | Rate/Night: | # Nights: | Total |
| | | | \$. | | \$. |
| County Reimbursement | | | \$. | | \$. |
| WI Land+Water Reimbursement | | | \$. | | \$. |

| MILEAGE | | | | |
|-----------------------------|--------------|----------|---------------|--------|
| Date: | Destination: | # Miles: | Mileage Rate: | Total: |
| | | | | \$. |
| County Reimbursement | | | | \$. |
| WI Land+Water Reimbursement | | | | \$. |

| REGISTRATION FEES and MEALS (if not included with registration) | | | | | |
|---|------------|--------|---------|------------------|--------|
| Date: | Breakfast: | Lunch: | Dinner: | Registration Fee | Total: |
| | \$. | \$. | \$. | \$. | \$. |
| County Reimbursement | \$. | \$. | \$. | \$. | \$. |
| WI Land+Water Reimbursement | \$. | \$. | \$. | \$. | \$. |

| TRAVEL STIPEND for NACD (cannot reimburse for expenses covered by WI Land+Water) | | | |
|--|--------------------------|---------------|--------|
| Dates: | Location of NACD Meeting | Stipend rate: | Total: |
| | NACD Regional: | \$100/meeting | \$. |
| | NACD National: | \$250/meeting | \$. |

| TOTALS | |
|-----------------------------|-------------|
| LODGING | \$. |
| MILEAGE | \$. |
| MEALS/REG | \$. |
| STIPEND | \$. |
| County Reimbursement | \$. |
| WI Land+Water Reimbursement | \$. |
| GRAND TOTAL | \$. |

Signature: _____

(Print name): _____

(Print address): _____

Date: _____

Attach a copy of all receipts & List any County and/or WI Land+Water reimbursement amounts.
Submit to NCLWCA Treasurer within 30 days of travel.