

# ACSA Activity Reimbursement Request Form

Complete this form using Adobe Acrobat Reader or a similar product. Please attach any receipts or supporting information.

**Reimbursement is in accordance with your agreement with the ACSA activity, and not all areas apply. Students: Items marked with \* typically are not covered for you!** Items indicated with  require receipts to be attached. For non-travel reimbursements, skip sections 3 through 5. Shaded boxes are calculated automatically.

## 1 Identification

Name: \_\_\_\_\_

Party to Reimburse: \_\_\_\_\_

Email Address: \_\_\_\_\_

ACSA Activity:  ACSAC  LASER

Other: \_\_\_\_\_

Conference Role:  Student Awardee  Instructor  Speaker  Organizer

Other: \_\_\_\_\_

## 2 Currency Conversion Rate

If you have expenses in a non-US currency, please let us know the conversion rate to USD (i.e., 1 £ equals xxx USD) and how you determined that rate. For US Dollar (USD) reimbursements, enter a conversion rate of 1

Your currency (if not USD) \_\_\_\_\_ (e.g, £, €, ¥, etc.) Conversion rate to USD \_\_\_\_\_

How did you determine the rate? \_\_\_\_\_

## 3 Transportation

Airfare (Roundtrip Amount) <input type="checkbox"/>	Date	In Your Currency	USD
From: _____	Depart _____	_____	_____
To: _____	Return _____	_____	_____

**For Personal Vehicles:** Mileage Reimbursement Rate in \$ \_\_\_\_\_ See <https://www.irs.gov/tax-professionals/standard-mileage-rates>

### Transportation to Airport:

Personal Vehicle: \_\_\_\_\_ miles @ IRS Rate = \_\_\_\_\_

Shared Ride  (indicate type: taxi, Uber, Lyft, other): \_\_\_\_\_

### Transportation from Airport:

Personal Vehicle: \_\_\_\_\_ miles @ IRS Rate = \_\_\_\_\_

Shared Ride  (indicate type: taxi, Uber, Lyft, other): \_\_\_\_\_

### Parking at Airport :

### Transportation to Conference Hotel:

Personal Vehicle: \_\_\_\_\_ miles @ IRS Rate = \_\_\_\_\_

Shared Ride  (indicate type: taxi, Uber, Lyft, other): \_\_\_\_\_

### Transportation from Conference Hotel:

Personal Vehicle: \_\_\_\_\_ miles @ IRS Rate = \_\_\_\_\_

Shared Ride  (indicate type: taxi, Uber, Lyft, other): \_\_\_\_\_

### Other Transportation Expenses :

\_\_\_\_\_  
\_\_\_\_\_

**TOTAL TRANSPORTATION TO BE REIMBURSED:**

\_\_\_\_\_

## 4 Lodging/Hotel

Hotel is typically reimbursed at the conference approved nightly rate, unless other arrangements have been made.

\_\_\_\_\_ Nights at \_\_\_\_\_ USD per night (including taxes and fees)

Notes: \_\_\_\_\_

Students:  I paid 100% of shared room  I did not pay any part of shared room

Roommate name: \_\_\_\_\_

**TOTAL LODGING TO BE REIMBURSED:**

## 5 Meals\*

Meals are typically reimbursed up to the per-diem maximum for the date, with the exception that when a meal is provided by the conference (i.e., breakfast, lunch, conference dinner), that meal cannot be claimed. Note that student conferenceships do not cover meals. Enter amounts in USD. Receipts are recommended, but not required.

Per Diem Maximum \_\_\_\_\_ Based on location. See <https://www.gsa.gov/travel/plan-book/per-diem-rates/per-diem-rates-lookup>.

Day/Date							TOTALS
Breakfast							
Lunch							
Dinner							
Total							
Adjusted							

**TOTAL MEALS TO BE REIMBURSED:**

## 6 Other Expenses

Other expenses that may be claimed depend upon the arrangements with the conference, but might include items such as internet fees, baggage fees, cleaning fees, shipping fees, or other expenses.

Expense	Date	In Your Currency	USD
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**TOTAL OTHER EXPENSES:**

## 7 Taxable Honorarium

If your arrangements with the conference or workshop include an honorarium or speaker's fees, or another form of non-reimbursement compensation, indicate here. Please make sure to provide tax information on your payee form.

Honorarium Information: \_\_\_\_\_

## 8 Adjustments

Total Reimbursement and Honorariums Claimed: \_\_\_\_\_

Maximum Reimbursement per agreements (if any): \_\_\_\_\_

Other adjustments (describe): \_\_\_\_\_

Total adjusted claim amount: \_\_\_\_\_

 **Continue to the next page to sign this form and learn how to submit it for reimbursement.**

## 9 Signature

The information I have provided on this form is correct to the best of my knowledge:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## 10 Submitting This Form

Save the completed form in a file that includes your name and date: "*Lastname* *Firstname* *Reimbursement* *Year*.PDF" (where  indicates a space, and you replace *italicized information* with your information). The completed form and receipts may contain Personally Identification Information (PII) that should be protected. The recommended way to submit your information is WeTransfer, which provides free encrypted file transfer that protects your PII. As a backup, you can also coordinate passwords and send an encrypted ZIP file. When your form is complete:

1. Connect to <https://wetransfer.com/> in your browser
2. You may need to click on "Take me to Free."
3. Enter the following in the "Email to" field: \_\_\_\_\_
4. Enter your email address in "Your Email"
5. Drag and drop or navigate to your completed form and your receipts
6. Click on Transfer

## 11 For ACSA Use Only

Recommended for approval by:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Position

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

ACSA Committee Approval:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Position

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Paid by:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

Payment Method: \_\_\_\_\_ Payment Reference: \_\_\_\_\_

Quickbooks Code/Category: \_\_\_\_\_

Notes: