|  |  |  |  |
| --- | --- | --- | --- |
| **USMS REIMBURSEMENT VOUCHER** | | | |
| **Budget Account Title: Account (Project) Number: Budget Year: 2017** | | | |
| **Instructions: (Pls. submit request within 30 days of incurring the expenses.)** 1. Use a separate voucher for each budget account number submitted. 2. Fill in the appropriate account number as found in the budget. 3. Please print or type legibly. 4. Attach receipts in order by expense type (number). You may use the reverse side for additional explanation or itemization. 5. Please DO NOT submit requests under $25 except at the end of the calendar year. 6. If a committee member incurs an expense, the committee member must complete the voucher and submit the voucher to the committee chair for an approval signature first before submitting the voucher to the CFO for reimbursement. 7. **REMINDERS: Be sure to attach expense receipts to the voucher. If the reimbursement is in excess of your approved budget, obtain the proper approval. See FOG Section VI.** **8. Mail or email completed vouchers to:  Reimbursements, USMS reimbursements@usms.org  1751 Mound St., Suite 201  Sarasota, Florida 34236** | | | |
|  |  |  | |
| Requester name: | | | |
| Address, City, State, ZIP | | | |
| Make check payable to third party: | | | |
| Address, City, State, ZIP: | | | |
|  |  |  | |
| **52100-MILEAGE EXPENSE** | | | |
| **Total Miles Traveled (enter below)** | **Per Mile** | **Mileage Reimbursement** | |
|  | $0.535 | $0.00 | |
|  |  |  | |
| **EXPENSE TYPE** | **AMOUNT** | **PURPOSE/EXPLANATION OF EXPENSE** | |
| 52100 Travel (mileage, attach proof) | $0.00 |  | |
| 52100 Travel (airfare/parking/taxi) |  |  | |
| 52200 Rental Car |  |  | |
| 52300 Hotel |  |  | |
| 52400 Meals/Entertainment |  |  | |
| 53100 Other Rent |  |  | |
| 53150 Office Rent/Utilities/Services |  |  | |
| 53250 Office Supplies |  |  | |
| 53300 Minor Software/Equipment |  |  | |
| 53350 Phone Costs |  |  | |
| 53400 Postage |  |  | |
| 53450 Printing/Photocopy Costs |  |  | |
| 53500 Dues/Subscriptions/Fees |  |  | |
| 54100 Production Costs |  |  | |
| 54250 Graphic Design |  |  | |
| 54300 Consulting |  |  | |
| 54350 Outside Services |  |  | |
| 54400 Video Production |  |  | |
| 54450 Brochures |  |  | |
| 54550 USMS Logo Merchandise |  |  | |
| 54600 Advertising |  |  | |
| 55100 Facilities Rent |  |  | |
| 55200 Recognition/Awards |  |  | |
| 55350 Hospitality |  |  | |
|  |  |  | |
| 18300 Less Contribution for SSL |  | Contribution for Swimming Saves Lives Foundation | |
| **TOTAL REIMBURSEMENT:** | **$0.00** |  | |
| I hereby submit this request for reimbursement of expenses incurred by me on behalf of USMS, Inc. | | | |
| **Signature of Requester:** | | | **Date:** |
| **APPROVALS** | | | |
| **Committee Chair/Officer:** | | | **Date:** |
| **CFO:** | | | **Date:** |