## EXPENSE REPORTING FOR ASOR

Description: Give a description of the reason for your reimbursement request: location, purpose

Dates: Dates of expenses and/or travel

Note: Deporting documentation (receipts, invoices, etc.) is required for all purchases. If no receipt is available (for example, a cash tip), include an explanation for an amount under \$5; if over \$5 with no receipt, a signed statement is required. Note: Description required for all expenses.

\*For mileage, see directions below.

						Grant Exp	enses					l			Mileage*			1			
		International Travel			Local Travel			Non-Travel Grant Expenses								Current rate: 0.670		i			
Item Number Date	Location	Lodging	Airfare/ground transportation		Lodging	Airfare/ground transportation		Equipment	Supplies	Contractual	Other Direct	CHI General	Annual Meeting	Developmen t	# of Miles	Amount	Category	SUBTOTAL	Description	Grant	Receipt Submitted?
Exp. 1 1/30/22	Home to DCA airport													\$ 14.41	22	\$ 14.74	Development	\$ 14.41	Dropoff at DCA airport for development trip to California		No, calculation of mileage included
Exp. 2 11/24/19	Westin San Diego LAX to												\$ 5.00					\$ 5.00	Cash paid to valet at AM19 at Westin San Diego Airfare for Hanan Mullins to travel to Morocco for training		No, note included
Exp. 3 5/4/22	Morocco		\$ 155.15																sessions with High Atlas Foundation	DRL 2021	Yes
1 2 3 4 4 5 5 6 6 7 8 9 10 11 11																\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -		\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -			
12 13 14 15 16 17																\$ - \$ - \$ - \$ - \$ -		\$ - \$ - \$ - \$ - \$ -			
18 19 20 21 22 23																\$ - \$ - \$ - \$ - \$ -		\$ - \$ - \$ - \$ - \$ -			
24 25		s -	s -	s -	s -	\$ -	s -	\$ -	s -	s -	s -	\$ -	s -	s -		\$ - \$ -		\$ - \$ -			

Signature		
	Da	te
Approval		
	Da	te
Second		
Signature**		
*Second cignature required for navments over \$3 000 (and for all navm	ents to Evecutive Director) Do	to.

## Directions for completing ASOR expense report:

Please submit ASOR credit card receipts and reimbursement requests on separate expense reports.

For reimbursement requests, you must state in your email to Britta that you are requesting a reimbursement.

Name: fill in your name.

Description: give a concise, but complete description of the activities or travel relevant to these expenses. Be sure to include location(s) of travel and purpose.

Dates: enter the dates of your travel.

Use a separate line for each receipt. If a receipt is allocated to multiple categories, use one line for each category.

Date: enter the date of the purchase.

Date: when the date of in the purchase.

Location: enter the location of the purchase.

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Enter the amount of the expense in the appropriate category (columns D-P). If your category is not there, enter the name of the category in place of one of the named categories and highlight the cell in yellow. Restate the category name in the Description field as well.

For mileage, enter the number of miles in # of Miles (column Q) then enter the calculated amount from Amount (column R) in the box of the appropriate category. For example, in Line 13, 22 miles were entered in cell Q13. R13 automatically calculated the amount of \$12.87. This amount is then entered in cell P13 under Development as it is a development expense.

The Subtotal (column T) will autopopulate with the amount for each line.

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Grant: if it is a federal grant expense, enter the name of the grant here.

Receipt Submitted?: this should almost always be 'yes," but if the answer is no, then a written explanation must be given for that expense. See Note above.

Double check that your amounts match your receipts.

Sign and date the expense report before submitting.

Submit the completed expense report along with all supporting documentation to Britta at finance@asor.org.

\*Please do not change the cells that have formulas in them (columns R, T, rows 41, 42)\*