

Check box if total amount is to be donated to CMC-North

Ck number \_\_\_\_\_  
Date written \_\_\_\_\_  
Amount \_\_\_\_\_

**California Mathematics Council  
Northern Section  
Fall Conference Speaker Reimbursement Form  
2022**

- Please bring this form with you to the CMC – North, Fall Conference Dec. 2 – Dec. 4, 2022 or mail it with the original (printouts for on-line purchases) receipts to the P.O. Box below by 1/10/2023.
- **Please read and follow the direction on the next page before completing this form.**
- Personal Information - Readable Please (Type or Print).

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Session Number(s) \_\_\_\_\_

Transportation – Actual cost

Airplane \_\_\_\_\_ Car Rental \_\_\_\_\_ Parking/Tolls \_\_\_\_\_

Taxi \_\_\_\_\_

Mileage (attach Google map):

Total Miles Driven: \_\_\_\_\_ (50¢/mile) \_\_\_\_\_ Round trip (Claim) [ ] Yes [ ] No

From City \_\_\_\_\_ to City \_\_\_\_\_ License Plate: \_\_\_\_\_

**Total Transportation – Actual Cost** \_\_\_\_\_ **Amount Claim** \_\_\_\_\_  
Max. \$125 for speakers traveling within CA

**Lodging - Speaker only Actual Cost** \_\_\_\_\_ **Amount Claim** \_\_\_\_\_  
Max. \$175 (\$225 for on-grounds housing)

**Speaker Materials: # of receipts** \_\_\_\_\_ **Actual Cost** \_\_\_\_\_ **Amount Claim** \_\_\_\_\_  
Max. \$50

**Original (print-outs for on-line purchases) receipts and proof of payment, in SPEAKER'S NAME are required for all expenses claimed. Be sure to follow the Receipts For Expenses Requirements on the next page.**

**Total Actual Expenses** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**Total Reimbursement Claimed** \_\_\_\_\_

**Signature:** \_\_\_\_\_  
Please don't forget your wet signature.

REIMBURSEMENT REQUESTS MUST BE POSTMARKED BY JANUARY 10, 2023 to be reimbursed.

Mail to: CMC-N Treasurer  
P.O. Box 1882  
Marina, CA 93933

Forms that are incomplete, improper receipts or not signed, will not be reimbursed.  
**Please enclose a stamped, self-addressed envelope for your reimbursement** or \$1 will be deduct from the reimbursement.

Questions: dkombe@yahoo.co.uk

## How much can I claim?

- If you did **one** presentation as a primary speaker and are traveling **within** California you may claim up to **\$350** (\$400 if you stayed on-grounds housing at the Asilomar Conference) in total expenses. The maximum expenses are as follows: Lodging: \$175 (\$225 if you stayed on-grounds housing at the Asilomar Conference); Travel: \$125; Supplies: \$50 (no electronic equipment including the ink cartridge is allowed.)
- If you did **one** presentation as a primary speaker and are traveling from **outside** California you may claim up to **\$425** (\$475 if you stayed on-grounds housing at the Asilomar Conference) in total expenses. The maximum expenses are as follows: Lodging: \$175 (\$225 if you stayed on-grounds housing at the Asilomar Conference); Travel: \$200; Supplies: \$50 (no electronic equipments including the ink cartridge is allowed).

## **IMPORTANT! PLEASE READ AND FOLLOW.** **Receipts For Expenses Requirements**

You may claim travel, lodging, supplies, and copying expenses as long as itemized original (printouts for on-line purchases) receipts are submitted for the **PRIMARY SPEAKER ONLY**. *Meals and gas cannot be claimed.*

**Original (printouts for on-line purchases) receipts and proof of payments, in SPEAKER'S NAME are required for all expenses claimed.**

All original receipts should indicate what was obtained/services rendered, name of company/store, date.

**CONFIRMATION RECEIPTS, CREDIT CARD STATEMENTS, AND COPIES OF RECEIPTS ARE NOT ACCEPTABLE.**

Original (printouts for on-line purchases) receipts for expenses for lodging (including the on-ground housing), transportation paid by credit card must show services rendered, speaker's name, the completed transaction (showing a 0 balance), the business name and dates service rendered. **The total amount paid and business name must be circled.**

Other original (printouts for on-line purchases) receipts for expenses paid by **credit card** must indicate what was obtained, date expenses made, show your name, show 'Paid by Credit Card,' or you may record 'Paid by Credit Card' on the receipt, and initial it. **The total amount paid and business name must be circled.**

Original receipts (printouts for on-line purchases) for expenses paid by **personal check** must indicate what was obtained, show 'Paid by Check,' or you may record "Paid by Check" and the check number on the original receipt, and initial it. The business name must be on the original receipt and date expense occurred, or you may record the business name and date expenses made, and initial it. **The total amount paid must be circled.**

Original receipts (printouts for on-line purchases) for expenses paid by **cash** must indicate what was obtained, show 'Paid in Cash' or you may record 'Paid in Cash' on the original receipt and initial it. The business name and date expense made must be on the original receipt or you may record the business name, and date and initial it. **The total amount paid must be circled.**

Please attach the original receipts (printouts for on-line purchases) behind this sheet. Incomplete forms will not be reimbursed. Any electronic submission (such as e-mail attachment) is **NOT** allowed at this time. Please mail this form and any of the original receipt(s) to the address on the first page. For the mileage, please include a copy of the Google or other on-line map mileage calculation including your starting and ending points.

**Any expense that does not follow the above will not be reimbursed.**