

# NEYM Representatives Travel Fund

The intention of this fund is to enable those who might not feel free to serve as a representative to Friends Organizations **outside** the bounds of NEYM because of personal financial constraints to do so without guilt or burden. However, it is the general expectation that most committee members will pay their own travel expense. The reimbursement policy (PB minute 06-63) reads: "Finance Committee recommends that all Friends who are reimbursed for mileage receive up to the IRS rate for business miles driven effective August 1, 2006. It is expected that Friends who find the current rate sufficient will not ask for more." The current mileage rate is available at [www.neym.org/committees](http://www.neym.org/committees) or by contacting the office. The list of committees eligible to submit to this fund for their larger organizational meetings are: Friends General Conference, Friends United Meeting, and Friends World Committee. The list also includes the Other Friends Organizations listed on page 128 of the 2007 minute book.

## For Distributions

The Presiding Clerk authorizes reimbursements for travel expenses and forwards the request to the Treasurer. *All requests for reimbursement must be accompanied by receipts and submitted within 3 months.* If you travelled to more than one meeting, please fill out a separate form for each meeting. Expect to wait two to four weeks for reimbursement. Complete the form below and send to: Jackie Stillwell, PO Box 893, Wilton, NH 03086-0893

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### Request for Representative Travel Assistance (attach receipts)

Committee/Event attended: \_\_\_\_\_

Date & place of meeting: \_\_\_\_\_

Cost of public transportation: \$ \_\_\_\_\_ Attach Receipts!

**AND/OR** the mileage driven: \_\_\_\_\_ times requested rate: \_\_\_\_\_, plus tolls : \_\_\_\_\_

**Total Requested:** \$ \_\_\_\_\_ Attach Receipts!

Your name: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Telephone: (     ) \_\_\_\_\_

Authorizing signature & date: \_\_\_\_\_

Presiding Clerk, Jackie Stillwell

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For bookkeeping use only, please.

received date \_\_\_\_\_ approved for payment \_\_\_\_\_ account # \_\_\_\_\_

check date \_\_\_\_\_ check # \_\_\_\_\_ check amount \_\_\_\_\_