



TRAVEL REIMBURSEMENT REQUEST FORM

Date of Travel	Travel Start Location	Travel Destination Location	Total Miles	*Transportation Reimbursement <i>Personal Automobile</i> Total miles x \$.57.5	Transportation Reimbursement: <i>Public Transportation</i> Actual Cost; Receipts Required	Amount of Tolls Receipts Requested	Lodging Costs Receipts Required	Other Expenses Description & Receipts Required	Total For Day

PLEASE NOTE: RECEIPTS ARE REQUIRED FOR OVERNIGHT ACCOMMODATIONS, TRANSPORTATION AND OTHER EXPENSES. RECEIPTS FOR TOLLS ARE REQUESTED. PLEASE ATTACH ALL RECEIPTS TO THIS FORM. REFERENCE ARTICLE IV. SECTION 5 FOR CURRENT REIMBURSEMENT AMOUNTS APPROVED SEPTEMBER 9, 2019.

Submit form with receipts to:
PACT
Attn: Charissa Williams
Dixon University Center
2986 N. 2nd St.
Harrisburg PA 17110-1201

Total reimbursement requested: _____

Signature of traveler: _____

Name of traveler (please print): _____

Address of traveler (please print): _____

*US GSA reimbursement rate effective January 1, 2020.
(BOG Policy 1986-07-A, Travel Expense Regulations) See reverse for reimbursable expense guidelines.

PENNSYLVANIA ASSOCIATION OF COUNCILS OF TRUSTEES (PACT)

BYLAWS

(Amended September 1, 2019)

ARTICLE IV – EXECUTIVE BOARD

Section 5. Compensation. The Executive Board shall serve without compensation except to the extent of reimbursement of reasonable expenses incurred in the furtherance of PACT's business, in accordance with State System Policy 1986-07-A: Travel Regulations or successor regulations related to travel and travel expense reimbursement. Requests for travel reimbursement must be submitted on the "Travel Reimbursement Request Form" and submitted within thirty (30) days of the event.