

TRAVEL REIMBURSEMENT REQUEST FORM

Date of Travel	Travel Start Location	Travel Destination Location	Total Miles	*Transportation Reimbursement Personal Automobile Total miles x \$.65.5	Transportation Reimbursement: Public Transportation 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: Total reimbursement requested: Pennsylvania State System of Higher Education Attn: Charissa Williams Signature of traveler: 2300 Vartan Way, Suite 207 Harrisburg, PA 17110 Name of traveler (please print): Address of traveler (please print):

*US GSA reimbursement rate effective January 1, 2024.

(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. <u>Compensation.</u> 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. <u>Requests for travel reimbursement must be submitted on the "Travel Reimbursement Request Form" and submitted within thirty (30) days of the event.</u>