

CSI Memphis
Reimbursement / Invoice Payment Request

Member Section

Member or Company _____

Address for Payment _____

Event _____

Expenses

Registration _____

Hotel _____

Travel miles _____ rate 0.165 total _____

Note: Mileage reimbursal rate for regional conferences is the IRS medical or moving rate. In 2010 it was 16.5¢. See www.irs.gov for the current rate.

Other _____

Total Expense _____

Signature _____

Date _____

Committee Chair Section

Committee/Budget to be charged _____

Committee Total Budget _____

Prior charges to this budget _____

Budget balance prior to this charge _____

Budget balance after this charge _____

Committee chair signature _____

Treasurer's signature _____

Attach receipts