	Str	eet Address:						Trip Locations:				
	City	y, State, Zip:					_	Trip Purpose:				
	□ Hol	ld Check for					_		Vendor #:			
					Please report a	all expenses	in U.S. Dollars (see Instruction	is)			
			Meals (incl	luding meal ti _l	ps)	Lodging	Transportation Expenses			Miscellaneous		
	Date (M/D/Y)	Traveler's Breakfast	Traveler's Lunch	Traveler's Dinner	Entertainment ³	Lodging (room and taxes only)	Airfare / Train / Bus ³ (Do NOT include travel paid for directly by A&I Travel)	Local (e.g., taxi and tips; auto rental 1)	Personal Vehicle (plus tolls & parking) 2	Tel/Fax/ Internet	Tips (do not include meal tips)	Other ³ (include checked bag fees)
10017												
w York 1001												
York, New												
New												
Avenue,	TOTAL	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
secona	SUMMARY	Y EXPENSE	ES				FOR ACCOUN	TING				
	Category		ccount Num	nber	Total	Controller's Office Only	Authorized by:	11110			Date:	
1	Meals				\$ -	O.m.y	Reviewed by:				Date:	
	Lodging				\$ -		Controller:				Date:	
	Travel				\$ -		Obligation #:				Date:	
	Misc.				\$ -		Check #:				Date:	
	Total Expenses				\$ -		¹ Ticket, original receipts and/or auto rental approval letter must be attached					
	Less Advance	Less Advance (cash or check) Received					Business travelers at \$0.67 per mile / Volunteers at \$0.14 per mile plus tolls and parking (please itemize on reverse)					
	Reimbursem	Reimbursement due Traveler (or to DFMS)					³ Please itemize on next page					
	TRAVELER	SIGNATUI	RE		DATE	_						
										Please re	eview the travel	guidelines at:
V								https	ellwayay enicco	nalchurch o	ra/nage/forms_ai	nd midelines

Trip Dates:

Traveler Name:

ITEMIZED EXPENSES

Date	Place of I	Entertainment	Cost	Names of Individuals En	ntertained	Business Purpose
<i>c</i> : 11	E /E 1/E	. /I /II	\.\.1 \\			
Date	Amount (Tel/F		escription	Date	Amount	Description
Date	Amount	De	escription	Date	Amount	Description

uto Rantal	Evnouses (attach)	authorization letter)				
	Expenses (attach o		escription	Dote	Amount	Description
uto Rental Date	Expenses (attach a		escription	Date	Amount	Description
	, 		escription	Date	Amount	Description
Date	Amount	De				
Date	Amount	De		Date \$0.14 per mile for volunteers;		
Date	Amount stomobile Use (Rein	De			gasoline is not reimb	
Date	Amount stomobile Use (Rein	nbursed at \$0.655 p	er mile business or	\$0.14 per mile for volunteers;	gasoline is not reimb	pursable)
Date	Amount stomobile Use (Rein	nbursed at \$0.655 p	er mile business or	\$0.14 per mile for volunteers;	gasoline is not reimb	pursable)
Date	Amount stomobile Use (Rein	nbursed at \$0.655 p	er mile business or	\$0.14 per mile for volunteers;	gasoline is not reimb	pursable)
Date	Amount stomobile Use (Rein	nbursed at \$0.655 p	er mile business or	\$0.14 per mile for volunteers;	gasoline is not reimb	pursable)
Date ersonal Au Date	Amount stomobile Use (Rein	nbursed at \$0.655 p	per mile business or Miles	\$0.14 per mile for volunteers;	gasoline is not reimb	pursable)

TRAVEL AND EXPENSE REPORT
The Domestic and Foreign Missionary Society
815 Second Avenue, New York, New York 10017

Please type or print clearly.

All requests for reimbursement must be filed on the Travel and Expense Report and must be accompanied by clearly legible scanned copies or e-invoices for ALL expenses other than tips (or original receipts if not within the 14-day window). Summary credit card statements and other copies are not acceptable. NOTE: To encourage prompt filing of Travel and Expense Reports, electronic copies will be accepted only when submitted within 14 days after incurring travel and entertainment expenses. All Travel and Expense Reports must be signed regardless of how they are submitted. The completed form should be forwarded to your Supervisor or meeting organizer for approval and submission to the Controller's Office within 14 calendar days following each trip or incurring entertainment and telephone expenses. Expenses submitted after 60 days will not be reimbursed.

If the U.S. dollar amounts stated on the Form are derived after converting from a foreign currency, please include a copy of the source document used for conversion. This document should clearly show the rate or conversion factor that was used in the computations. We suggest using the converter available at http://www.oanda.com/convert/fxhistory.

Expenses that are generally subject to reimbursement

The following are usually accepted for reimbursement: transportation, lodging, meals, and certain miscellaneous expenses. Details are provided in the Guidelines for Official Travel available at http://www.episcopalchurch.org/page/forms-and-guidelines

Expenses that are not subject to reimbursement

Any expenses not specifically addressed in the Guidelines as reimbursable must have prior written explanation and approval. Non-reimbursable expenses include but are not limited to the following: Spouse's travel expenses; dependent care; pet care; supply clergy to substitute for clergy on official business; lost pay; use of frequent-flyer miles; additional travel insurance; luggage purchase or replacement; unofficial (personal) entertainment; in-room movies; barber and beauty services; newspapers and magazines; sightseeing; medical services; motor vehicle fines; "no show" charges for hotels, car rental and limousines; charge card late fees and expenses.

Submitting a Request for Reimbursement

Receipts should be scanned, taped or stapled to blank sheets of letter-sized paper, and properly spaced so that all the numbers on each receipt are clearly identifiable. These blank sheets should then be attached to the T & E form. We request that you not bunch and staple receipts one behind the other, as this delays review and processing.

Please direct all requests for reimbursement to the staff person through whom the meeting arrangements were made.

Requests for reimbursement for group travel for Members of Interim Bodies of the General Convention or Executive Council should be sent to: GCOffice@episcopalchurch.org or by mail to General Convention Office, The Episcopal Church Center, 815 Second Avenue, New York, NY 10017, Tel: (212-716-6017)