

Expense Reimbursement Instruction Form

- ORIGINAL receipts are required for all expenses. You will be reimbursed for your allowable expenses.
- Please return receipts, the reimbursement form, and the evaluation form (unless submitted at the workshop), within 30 days of your departure.
- SAMSI can only reimburse airfare on U.S. Flag carriers (when available).
- E-ticket receipts printed from the Internet should be accompanied by either an e-ticket check-in receipt (from the airline) or boarding passes.
- Original receipts are required for meal expenses. Citizens and permanent residents of the United States are eligible to claim a meal per diem of \$30 per day (\$20 for days with lunch provided) in lieu of submitting receipts. However, per diems are treated as taxable income by the Internal Revenue Service. Meal expenses for which receipts are submitted are not subject to taxation. The total reimbursement from receipts cannot exceed the cumulative allowed per diem.
- SAMSI cannot reimburse expenses for alcoholic beverages, telephone calls, or entertainment (ie. in-room movies, theater, etc.)
- The mileage rate for use of a private vehicle is \$.485 per mile. Provide the number of miles driven on the information form.
- If you are a Foreign National (and leaving the U.S. after this workshop), SAMSI must have a copy of your passport and visa information. **BEFORE YOU LEAVE THE U.S.**, make a copy of the following:
 - Passport Information Page (with photo, number, etc)
 - US visa or visa stamp
 - Front AND Back of the I-94 card

 - If permanent resident, please provide a copy of your card

Without this visa documentation, SAMSI will not be able to reimburse you.

NOTE: Please keep a copy of your reimbursement request & receipts for your records. This documentation will be helpful should the information be lost in the mail.

SAMSI Expense Reimbursement Information Form

Name: _____

Home

Address: _____

Telephone: _____ **Fax:** _____

Email: _____

Social Security Number: _____

U.S. Citizen/Permanent Resident: Yes No

If permanent resident, please include a copy of your card

If you checked “no”, please include copies of the following:

- Passport information page (with picture, name, etc.)
- U.S. visa
- front AND back of the I-94 card
- any other supporting information (i.e. I-20, IAP-66, etc.)

Trip Dates: departed _____ returned _____

Event Attended: _____

Mileage (private vehicle only): _____

Signature: _____

Return this form, evaluation and original receipts to

SAMSI

ATTN: Accounts Payable

PO Box 14006

RTP, NC 27709

DON'T FORGET TO MAKE A COPY FOR YOUR RECORDS

Questions? Email admin@samsi.info