

**TRAVEL EXPENSE VOUCHER  
AMERICAN MATHEMATICAL SOCIETY  
201 Charles Street  
Providence, RI 02904**

Level B Joint Data Committee Forward to Staff Liaison: Maureen McVeigh
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Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
street city state zip

Purpose of trip: AMS-ASA-IMS-MAA-SIAM Data Committee  
meeting attended  
Boston, MA January 7, 2012  
city, date

Date and hour: Departure: \_\_\_\_\_ Return: \_\_\_\_\_

**TRANSPORTATION EXPENSES:**

Airline ticket reimbursement is limited to discounted y-class, at least two weeks advance purchase rate.  
 Private automobile mileage reimbursement is limited to the comparable cost of an airline ticket.

Intercity:	From	To	Carrier	Amount Claimed
_____				\$ _____.
_____				\$ _____.
Local (taxi, etc. to and from home/airport/hotel only - may not exceed \$150)				\$ _____.
Private auto: _____ miles @ 55.5¢ per mile plus \$ _____ tolls, \$ _____ parking				\$ _____.

**LIVING EXPENSES:** (limited to night before, and night of meetings)

Hotel (do not include movie rentals, health club, laundry, or more than one long distance telephone call per day) \$ \_\_\_\_\_.

Meals (ACTUAL expenses only, which do not appear on hotel bill; list on reverse) \$ \_\_\_\_\_.

**TOTAL EXPENSES CLAIMED**    **RECEIPTS ARE REQUIRED FOR ALL EXPENSES**    \$ \_\_\_\_\_.

**ADJUSTMENTS** (see reverse) \$ \_\_\_\_\_.

**AMOUNT REQUESTED** **\$ \_\_\_\_\_.**  
(Attach payment if amount of adjustments exceeds total expenses.)

I certify that this statement of charges claimed by me, including attachments, is correct and proper.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Office Use Only		
Supervisor: _____	<u>55004-1145-035-00</u>	\$ _____.
Date: _____	_____-_____-____-	\$ _____.
Revised 12/07		

## Level B

Travel support is provided for meetings of Level B committees. The Level B voucher is for use to reimburse official committee meetings. In the case of Joint Committees, support from the AMS is available to AMS committee members only. Committee chairs should notify the AMS liaison before undertaking meetings for which travel support will be required. Members are urged to exercise economy in formulating travel plans and discretion in requesting reimbursement from the Society.

### **Reimbursable travel expenses**

This is a "full travel support" committee. Meetings are limited to the stated number per year (see charge). Travel to other functions will be reimbursed only with prior approval of the committee chair and staff liaison, assuming an adequate committee travel budget has been approved by the ECBT. For each member attending a regular meeting of the committee the following expenses will be reimbursed, if requested: ground transportation (up to \$150) to and from home/airport/hotel; air or other transportation up to the discount round trip air amount; lodging for the night before and/or night of any scheduled meeting; reasonable meals for that time period (except that when meals are to be served in a meeting, no other meal will be reimbursed during that part of the day); and one long distance phone call per day in the travel time period.

### **Limitations on tickets and hotel**

Air tickets must be purchased at least two weeks in advance and can be reimbursed before the travel takes place. Reimbursement will be made for the actual cost of an airline ticket, or ticket for another form of transportation, not exceeding discounted economy "Y" class round trip fare from the major airport nearest the member's home base in the United States or Canada. If driving, reimbursement will be at the AAA official mileage from home city to the meeting site and back at the current approved rate, to the extent that this amount does not exceed the cost of discounted economy "Y" class round trip air fare for the same trip. Hotel and meal expenses will be covered for no more than the night before, and night of, any meeting attended.

### **Expenses not covered**

Expenses not covered include: excess charges for airline tickets not purchased at least two weeks prior, excess baggage charges, ticket change charges if for personal reasons (except if plans are changed due to illness or emergency), flight insurance, first class tickets, room charges in excess of the single rate, laundry, health club fees, in-room movies, non-AMS business telephone tolls in excess of one per day and registration fees for AMS meetings.

### **Submitting vouchers**

The Level B completed voucher form should be forwarded to the Staff Liaison at the AMS address. Attach receipts, including ticket stubs, for all expenses. Expenses under \$25 may not require receipts if a receipt is not readily available; however, **only actual expenses will be reimbursed, not estimated.** All expense reimbursement requests must be received within 90 days of the date the meeting occurred. A copy of each voucher and all supporting documentation should be retained for possible inspection by the Internal Revenue Service.

### **Adjustments (including advances)**

In those instances where the expenses have been or will be paid directly by the AMS please indicate here.

### **Other expenses**

Also, some reasonable communications charges such as long distance telephone and postage will be reimbursed if approved in advance by the committee chair and the staff liaison. Certain communications expenses such as mailing, conference calls or other committee business expenses may be requested by the committee chair. Obtain Level F "Communications Expenses" reimbursement form for expenses of this type.

### **Special grant conditions**

Grant-supported projects requiring meetings have special exceptions. No alcoholic beverages will be reimbursed under a federal grant-supported project. Also, only air travel on U.S.-flag carriers will be reimbursed by federal agencies. Please consult the staff liaison for details.

## MEAL LOG

DATE	BREAKFAST	LUNCH	DINNER	TOTAL