

Ryan White Planning Council Reimbursement Request

Council Member Name: _____

Date of Meeting(s): _____

Meeting (Check All Meetings for This Date):

- | | | |
|---|--|--|
| <input type="checkbox"/> Planning Council | <input type="checkbox"/> Consumer Access | <input type="checkbox"/> Membership |
| <input type="checkbox"/> Bylaws, Policies & Procedures | <input type="checkbox"/> Executive | <input type="checkbox"/> Needs Assessment & Comprehensive Planning |
| <input type="checkbox"/> Care, Strategy, Coordination & Standards | <input type="checkbox"/> Financial Oversight & Allocations | <input type="checkbox"/> Other: _____ |

Requested Reimbursement Detail:

One item per line (Taxi, Metro, Mileage, Parking,)	Amount	Receipt Attached (Y/N)
1.	\$	
2.	\$	
3.	\$	
4.	\$	
5.	\$	
TOTAL REQUESTED	\$	

Personal Information:

Address:	
City, ST, Zip:	
Phone:	
Fax:	
Signature	Date:

Approval Signature: _____ Date: _____

Guidance

1. All reimbursements are made consistent with federal guidance and local regulations. In the event of any conflict between local and federal rules, the federal rules prevail.
2. Reimbursements are available to individuals who are named as members of the Planning Council.
3. Reimbursements are permitted for costs incurred as a result of participation in meetings of the Planning Council or its committees. Generally, reimbursement is available for the costs of transportation to and from meetings and child care to allow for participation in meetings. A reimbursement for meals may be offered for some meetings at which refreshments are not provided.
4. For more information on the permitted costs, or for copies of the federal and local guidance and regulations, please contact Planning Council support by calling 202/671-4900.

Instructions

1. Complete one Reimbursement Request for all meetings on a single day.
2. No receipt is required for reimbursement for Metro or for mileage. Generally, all other items including taxi and meals require receipts.
3. Provide all of the information requested on the Reimbursement Request, including the date of the meeting.
4. Sign and date the Reimbursement Request.
5. Provide the Reimbursement Request to Planning Council support at the end of the meeting, or send the Reimbursement Request and receipts to

Mark Hill
Planning Council Support
Fax Number 202-671-4860