

**National Association of State Boards of Accountancy, Inc.**

150 Fourth Avenue North, 7th Floor, Nashville, TN 37219-2417

**Reimbursable Travel and Entertainment Expense Report**

<b>Please read Instructions below before completing.</b>						<b>Submit completed form to NASBA Accounts Payable</b>		
<b>City</b>								<b>Totals</b>
<b>Day of Week</b>								
<b>Date</b>								
Airfare <i>(excluding baggage fees)</i>								
Local Transportation								
Lodging								
Rental Vehicle <i>(excluding fuel)</i>								
Personal Vehicle <i>(miles x IRS Rate)</i>								
Other Transportation								
Tolls and Parking								
Gratuities <i>(other than meals)</i>								
Telephone/Internet								
Personal Meals								
Breakfast								
Lunch								
Dinner								
Other								
Entertainment Expense <i>(Enter Details on Page 2)</i>								
Other Business Travel Expense <i>(baggage fees, fuel, etc.)</i> <i>(Enter Details below)</i>								
<b>Details</b>						<i>Do not alter this form. If more space is needed, use a separate sheet.</i>	Total Expenses	
							Less Advances <i>(enter as a positive)</i>	
							Due From (To) NASBA	
<b>Name of Traveler</b>						<b>Instructions</b>  List expenditures individually by day (e.g., hotels, meals, gratuities).  Include tips for servers in cost of meals.  Attach receipts for expenses:  Staff--All expenses Non-staff > \$75  Page 2 must be completed for Entertainment expenses.	<b>NASBA USE ONLY</b>	
<b>New Address?</b>		<b>Trip Purpose</b>					Approved by	
Yes	No						Date	
<b>Address (1)</b>		<b>City</b>					<b>Account Nos.</b>	<b>Amount</b>
<b>Address (2)</b>								
<b>City</b>								
<b>Certification of Traveler:</b> I certify that the above expenses						<b>State</b>	<b>Zip</b>	
are ordinary and necessary and that I have no source of reimbursement other than from NASBA.								
<b>Signature of Traveler</b>				<b>Date</b>				

