SDASCOE APPLICATION FOR PAYMENT

Please complete the applicable items for reimbursement based upon current SDASCOE policies. Please provide receipts for reimbursement as indicated.

NAME - TITLE			
MAILING ADDRESS			
DATE OF EVENT			
EVENT - EXPLANATION			
Scholarship Item for NWA R	PENSE REIMBURSEMENT - N ally or NASCOE Convention, po ses. Attach documentation with	stage, or other approved	
DART RELOCAL TRAVEL	EXPENSE - SDASCOE EVNTS	ONL V:	
_	ocal Meetings or State Conventi		Total of Items in this Section
Mileage (Total Miles X Total Miles from place of Mileage Rat \$0.20 below Lodging Expense - Mo Attach Motel Receipt Registration Fee and I Attach Registration For	Rate) of residence e prevailing POV USDA rate roun otel Parking Fees Meals on Registration Form	oded up to nearest \$0.01	Enter Total Here
TOTAL AMOUNT DUE FOR Total of Part A + Part B + Pa	EXPENSE REIMBURSEMENT art C as applicable		
RETURN COMPLETED FOI Jessica Weets, SDASC 406 S 6th Street Milbank, SD 57252 sdascoetreas@gmai	OE Treasurer	Signature DATE PAID	e of Claimant and Date
Scan/Email or Mail to Je	essica	CHECK NO.	

NON-LOCAL TRAVEL EXPENSE WORKSHEET - NASCOE SPONSORED EVENT

Use this worksheet for NWA Rally, NASCOE Convention, or other NASCOE sponsored event

DATES -	- EVENT - LOCATIO	N			
PART A	- PERSONAL VEHI	CLE MILEAGE (Total M	liles X Rate)		
	Total Miles		,	_	Mileage Total Amount
	from place of reside	ence		-	
	Mileage Rate			•	
	\$0.20 below prevail	ling POV USDA rate rou	inded up to nearest \$6	0.01	
	Personal Vehicle To	oll Fees (Provide Receip	ot)	_	
	Only while driving F	² ersonal Vehicle			Toll Fee Total
		ARRIER EXPENSE (Re		.	
Airline, I	rain, Bus - Include C	Cost of Ticket, Travel Ins	surance, Luggage Fee	es, Terminal F	Parking Fees
DADTO	DENTAL VELICLE	- 000T0 (D			
		E COSTS (Recipts Requ	,		
As autho	orized according to tr	ave policy - include Fue	l Costa or Toll Fees in	icurrea wniie	using rental
		NTAL EXPENSES (M&	•	_	T. I. J. S. M.O. I.
Number	or Days determind b	<i>y SDASCOE Travel Pol</i> First Day of Travel (75			Total of M&IE
			, <u> </u>		
	Full Rate	# of Days	Total		
		Last Day of Travel (75	% of Rate)		
		, ,	·		
	- LODGING	No. of Nights		Total	
Including	g any motel parking f	ees - number of nights a	according to SDASCC	E travel polic	Cy .
PART F		EE and UBER/LYFT/Ta	•	_	
	_	Fee (No Late Fee) - Pro Bus/Metro, etc fees	vide Registration Fori	n	
	Provide Public Tran	•		_	
PART G	- MINUS NASCOE	STIPEND AND/OR ADV	ANCE PAYMENT		
		directly to Alt Execs, Na		irs, DSA Win	ners, etc
TOTAL A	AMOUNT DUE FOR	NON-LOCAL TRAVEL			
		art D + Part E + Part F n	ninus Part G	Tranfer to Po	art C of Application for Pmt