NON-EMPLOYEE TRAVEL REIMBURSEMENT CLAIM

STATE OF NORTH DAKOTA
SFN 10230 (8-2009)

TYPE OR PRINT

___ = Attach Receipt(s)

TYPE OR PRINT

= Attach Receipt(s)

Name of Board or Commission

Address	City	State	Zip Code

Name of Board or Commission

INSTRUCTIONS

Enter amount of expenses that you incurred in block to the right. Do not include automobile mileage unless you drove your own vehicle. Reimbursement is $.55 per mile in North Dakota, $.55 per mile for the first 300 miles of out-of-state travel, and $.18 after 300 miles.

Receipts must be attached to this form for all costs indicated by "—". Actual receipts are required; copies of credit card slips are not acceptable.

Lodging for in-state is reimbursed at actual cost up to 90% of GSA rate/day plus additional state and local taxes applicable to the GSA rate; out- of-state is actual cost.

"*Other*" costs must be explained and receipt(s) attached.

Date of Departure From Home	Time of Departure From Home	Date of Return To Home	Time of Return To Home
Yes - Which?	☐ AM ☐ PM		☐ AM ☐ PM

INSTRUCTIONS

Enter amount of expenses that you incurred in block to the right. Do not include automobile mileage unless you drove your own vehicle. Reimbursement is $.55 per mile in North Dakota, $.55 per mile for the first 300 miles of out-of-state travel, and $.18 after 300 miles.

Receipts must be attached to this form for all costs indicated by "—". Actual receipts are required; copies of credit card slips are not acceptable.

Lodging for in-state is reimbursed at actual cost up to 90% of GSA rate/day plus additional state and local taxes applicable to the GSA rate; out- of-state is actual cost.

"*Other*" costs must be explained and receipt(s) attached.

Lodging	$
Automobile Mileage (Out-Of-State)	
Registration Fee (If Paid By You)	$
Lodging	$
Automobile Mileage (Out-Of-State)	

Were meals included in registration fee? ☐ No ☐ Yes - Which?	Number of Lunches
Explanation of Travel and Other Costs	

BREAKFAST $5.00

BOTTOM SECTION FOR USE BY PROCESSING AGENCY ONLY

BOTTOM SECTION FOR USE BY PROCESSING AGENCY ONLY

LUNCH $7.50			LODGING OUTSIDE NORTH DAKOTA		
BREAKFAST $5.00	LUNCH $7.50			DINNER * 50%	SUB TOTAL DINNER * 50%
Rate			Days =		
Rate	X	Days =	@$.55 =	X	Days =
@$.55 =			* @$.18 =		
* Number of Lunches					

No. X Rate = Cost

SUB

Number of Meals

TOTAL

No. X Rate = Cost

LODGING

MILEAGE

Days =

Department

Meals

Lodging

Agency Approval (Authorized Signature)

Department

Agency Approval (Authorized Signature)

Meals	
Lodging	$
	$
Commercial Transportation	$
TOTAL CLAIM	$
Other	$
Other	
TOTAL CLAIM	$