



2019 PRIME TIME TRAINING WORKSHOP – REIMBURSEMENT REQUEST

Please supply the name and address of the person or organization requesting reimbursement.
If both, please use separate forms.

Name: _____

Address: _____

Phone: _____

Only reimbursement requests for reasonable and routine travel and other incidental expenses will be approved and processed. For purposes of determination of reasonableness, Humanities Washington will reference the federal government's most current location-based per diem rates as listed on the U.S. General Services Administration website, which can be found here: <https://www.gsa.gov/travel/plan-book/per-diem-rates>.

Please return completed forms to:
Humanities Washington, 130 Nickerson St. Suite 304, Seattle, WA 98109.

	Date: May 1	Date: May 2	Date: May 3	Date: May 4	
Purpose of Trip	Prime Time Training	Prime Time Training	Prime Time Training	Prime Time Training	TOTALS
Budget Category	Family Reading	Family Reading	Family Reading	Family Reading	
Origin	From:	From:	From:	From:	
Destination	To:	To:	To:	To:	
Parking					\$
Mileage (58¢ / mi)	Mileage: \$	Mileage: \$	Mileage: \$	Mileage: \$	Total Mileage: \$
Airfare					\$
Other Transport	Type: \$	Type: \$	Type: \$	Type: \$	\$
Other:					
TOTALS	\$	\$	\$	\$	\$

Participant Signature _____

Date _____

Approval (Humanities Washington) Signature _____

ALL RECEIPTS MUST BE INCLUDED
(except for mileage)

