**Montana Association of Symphony Orchestras**

2210 S 9th St W

Missoula, MT 59801

**2020 Travel Voucher**

Name

Address

City ST ZIP

# Travel:

1.) Purpose

2.) Destination

3.) Date(s)

A B C

Reimburse Paid by In-Kind\*

**Transportation** Cash Credit Card contribution

1.) Personal vehicle

 miles round trip @ $0.44/mile = $ 2.) Rental vehicle Total rental =

Total fuel =

3.) Air/(coach only)

**Lodging** (attach receipt)

 nights @ $ per night

# Services

Volunteer

 hours X $ /hour xxxxxxxxx xxxxxxxxx

# Meals

1. Per diem @ State rate (no receipts required):

Breakfast @ 5.00 Lunch @ 6.00 Dinner @12.00

1. Actual (receipts attached)

**Other** (receipts attached)

# Column Totals $

Signature Date

\*In-kind means expenses paid on behalf of MASO for which you do not request reimbursement. \*\*In 2019 MASO will reimburse $0.44/mile; volunteers who itemize may claim a federal tax deduction of $0.14/mile by IRC and Revenue Procedures. Contractors - $.58/mile.

\*\*\*The 2016 IRS approved rate for volunteers is $24/hour.