

# West-MEC Invoice

## CTSO In-State Event Reimbursement

Date Submitted : \_\_\_\_\_

District: \_\_\_\_\_

High School: \_\_\_\_\_

CTSO:                    DECA      EdRising      FBLA      FCCLA  
*(Please circle)*                    FFA      HOSA      SkillsUSA

Sub-category: \_\_\_\_\_

- West-MEC Invoice Completed and signed
- Copy of bill for registration fees (\$95. max per student)
- Copy of district purchase order
- List of student & advisor attendees (chaperones not a covered expense)

Advisor Name: \_\_\_\_\_

Event Title/Description: \_\_\_\_\_

Location of Event: \_\_\_\_\_

Date of Event: \_\_\_\_\_

Reimbursement for:	Quantity	Price	Total
Advisor Registration:			
Student Registration:			
<b>Total Reimbursement:</b>			

West-MEC will reimburse for registration only as outlined in the CTSO support instructions.  
 Original Documentation must be provided with this invoice. (Original invoice, P.O., Registration Form, etc.)  
 Fall Semester Reimbursements due in February; Spring Semester Reimbursements due in June.

\_\_\_\_\_  
 Local Director Signature

Date Received by West-MEC: _____	PO# _____
Amount Approved: _____	1st event _____
Approved by: _____	2nd event _____