

West-MEC Invoice

Date Submitted : _____

CTSO National Travel Reimbursement

District: _____

High School: _____

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

Sub-category: _____

- West-MEC Invoice completed & signed
 - Copy of bill for conference registration fees
 - Copy of bill for hotel & airfare (\$300 combined max per student)
 - Copy of district travel reimbursemen claim (advisor)*
 - Copy of bill & payment for rental car/bus/cab fare (advisor)*
 - Copy of district purchase orders for all above purchases
 - List of attendees (students must have qualified to attend)
- *West-MEC only reimburses costs for 1 advisor to attend

Advisor Name: _____

Location of National Conference: _____

Date(s) of Competition: _____

| Reimbursement | Quantity | Price | Total |
|---------------|----------|-------|-------|
|---------------|----------|-------|-------|

Documentation must be included for each of the following:

| | | | |
|--|--|--|--|
| Student Registration (may not include food): | | | |
| Student Travel (hotel & airfare - \$300 max): | | | |
| Advisor Registration (may not include food): | | | |
| Advisor Hotel: | | | |
| Advisor Travel (airfare- include district travel expense form): | | | |
| Advisor Ground Transportation (rental car, taxi fare, etc.): | | | |
| Total Reimbursement: | | | |

Local Director Signature

Date Received by West-MEC: _____ PO# _____

Amount Approved: _____

Approved by: _____