



## NEASC International Accreditation Visit – Team Member Expense Voucher

Submit voucher and all receipts directly to the school during your visit. Reimbursements for authorized expenses must be claimed within two months following the visit.

### Team Member Information

Name:	Email:
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### Visit Information

School Name:	Location:
Visit Dates	From: To:

### Expenses

Only out-of-pocket expenses connected with the school visit should be claimed. Personal expenses will not be reimbursed.

Travel	Amount	Currency
Travel Ticket to/from host country		
Transport to/from home airport		
Transport to/from host country airport and hotel		
<b>Total Travel Expenses</b>		
Other Expenses (please itemize)	Amount	Currency
<b>Total Other Expenses</b>		
<b>Total Reimbursement Requested</b>		

### Select preferred method of payment

- Check Payable to:
- Cash Specify currency:
- Bank transfer to school/personal account:
  - Name of bank:
  - Branch address:
  - Bank Account Number:
  - IBAN Number:
  - BIC Number:

Signature (required): \_\_\_\_\_ Date: \_\_\_\_\_

Approval (if needed): \_\_\_\_\_ Date: \_\_\_\_\_