

**THE AMERICAN LEGION – DEPARTMENT OF NEW YORK
Mid-Winter Conference**

PAYEE: NAME: _____

ADDRESS: _____

Please List your Committee

To receive your reimbursement-check at the Mid-Winter Conference, vouchers need to be received at headquarters **no later than January 5, 2023.**

Any voucher received after that date, check will be mailed after Mid-Winter Conference is over.

DESCRIPTION/ Please list your committee's name		TOTAL
Please list your committee		
VOUCHER MUST BE SUBMITTED WITHIN 60 DAYS AFTER EVENT IN ORDER TO BE REIMBURSED		
Per Diem is \$100.00; Mileage is .50/mile. Tolls will NOT be reimbursed. Mileage is paid for <u>ONE</u> person only. No mileage is allowed for passengers.		
If possible, Please include receipts	Total	\$

I hereby certify that the foregoing account is true to the best of my knowledge and belief.

Date

Signature

FOR DEPARTMENT USE ONLY

DEPARTMENT ADJUTANT