

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

Name: _____

Address: _____

To receive your reimbursement-check at the Mid-Winter Conference, vouchers need to be received at headquarters **no later than January 3, 2025**. Any voucher received after that date will be mailed after Mid-Winter Conference is over.

DESCRIPTION/ Please list your committee's name		TOTAL
You must attend & sign in to your assigned committee meeting.		
No mileage reimbursement will be authorized for individuals living within fifty (50) miles of the meeting site		
VOUCHER MUST BE SUBMITTED WITHIN 60 DAYS AFTER EVENT IN ORDER TO BE REIMBURSED. Per Diem is \$100.00; Mileage is .51/mile. Tolls will NOT be reimbursed.		
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