TRAVEL & OFFICE EXPENSE CLAIM

INTERNATIONAL OFFICERS, DIRECTORS, PAST PRESIDENTS AND PAST DIRECTORS

Expense	List Date
☐ **In-District Budget**	
☐ **Board Meeting / Int'l Convention**	
☐ **Speaking Assignment**	
☐ **Committee Meeting**	
☐ **Forum (transportation only)**	

Name: _____ Home District No. _____

Title: _____ Month _____ (One month per claim form)

Date	Purpose of Assignment / Event	**RECEIPTS** Breakfast	**MUST** Lunch	**BE** Dinner	**ATTACHED** Hotel	Transportation* (airline, parking, taxi, tolls, etc.)	Tips	Kilo-meters	Amount (kms. X .31)	Miles	Amount (miles X .50)	Office/ Printing/ Postage & Supplies	Gifts/Visas & Registration	Laundry	Total
Totals															

Notes: _____

***Required cancelled tickets & proof of payment**

Signature _____ (required)

CLAIMS MUST BE SUBMITTED BY THE 20TH OF THE FOLLOWING MONTH - NO PAYMENT WILL BE MADE BEYOND 60 DAYS PAST DUE

OCF-15

Send to: OfficerDirectorClaims@lionsclubs.org FX (630) 706-9199