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**2024 Stipend and Expense Reimbursement Request**

**EVENT NAME:**

**EVENT LOCATION:**

**DATE:**

**Individual TO’s Stipend: $**

Sprint/International Distances: $100.00

Middle/Long Distances: $150.00

Head Official receives an additional: $75.00 **$**

1. **Mileage Charge:** R/T mileage\_\_\_\_\_\_\_ x $0.67/mile **$**
2. **Lodging Reimbursement (*if applicable*) $**
3. **Airfare $**
4. **Parking &Tolls $**
5. **Rental Car & Fuel $**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **TOTAL DUE OFFICIAL: $**

**OFFICIAL’S NAME:**
**ADDRESS:**
**CITY, STATE, ZIP:**

**EMAIL:**
**PHONE:**