

Mountain Sky Conference
d/b/a Rocky Mountain Conference of The United Methodist Church
Check Request

Make Check Payable To

**Check
Amount**

Name _____
 Address _____
 City, State, Zip _____

\$

Mail Check to Address Above

Return
 Check To: _____

Submitted By _____

Date _____

Approved By _____

Date _____

(Signature or Approval via email)

Expenses to be Reimbursed

****Requests for reimbursement must be made no later than 60 days after expense is paid or incurred**

Fund to Charge	Description	Office Use GL/Loc/Ext Att	Amount
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Total			\$

Mileage Reimbursement (for Travel-Conference Meetings Journal Standing Rule 3.1.2)

****Requests for reimbursement must be submitted within 30 days after conclusion of travel. Please include a google map or log for your mileage listing To and From destinations.**

Fund to Charge	Date of Travel	Purpose of Travel	Office Use GL/Loc/Ext Att	Mileage
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Total Mileage				0
Lay and Clergy members - less first 50 miles				
Net Mileage				0
Rate - \$.15 per mile, excl first 50 miles; add \$.05 per mile for each addtl participant riding to the meeting				\$ -
Mileage Reimbursement				\$ -

- * Please include all receipts with this form to ensure timely processing of your request
 Meal expenses must include the detailed receipt showing what was purchased - per United Methodist Discipline no reimbursement can be made for alcohol purchases
- * Emailed copies of receipts are acceptable if this form is submitted electronically and receipts are legible

Please return your completed form to the Conference office via mail or email

Mail: Mountain Sky Conference of The United Methodist Church
 6110 Greenwood Plaza Blvd
 Greenwood Village, CO 80111

Email: jbooth@mtnskyumc.org

Questions? Please call Julie at (303) 325-7049