



Expense Form

Submit this form to SWLS CE Validator Shauna Koszegi and attach all necessary receipts for your reimbursement. Please allow 4-6 weeks for SWLS to process your reimbursement. SWLS will reimburse the library OR the applicant in ONE check for all approved expenses.

	Short Description	Amount
<p>Registration, Tuition, or Training Fee</p> <p>See www.swls.org/library-staff/ce-scholarships for a list of eligible expenses.</p>	<p>Example: SWAL Conference Registration Fee</p>	\$
<p>Mileage & Transportation</p> <p>Mileage is reimbursed at the Federal rate of \$.655/mile. Include parking and other transportation expenses (bus, train, etc).</p>	<p>\$.655 x number of miles = total mileage cost</p>	\$
<p>Meals</p> <p>Meals are reimbursed at the State rate of \$59 a day maximum; \$13 for breakfast, \$15 for lunch, \$26 for dinner, \$5 for incidentals.</p>		\$
<p>Lodging</p> <p>Lodging is reimbursed at State rate of \$96 per night unless otherwise stated.</p>		\$

Enter Total Amount Here: \$ _____

Payment Information

Name: First and Last

Your Library:

Pay To: Your name OR the Library

Address: Where should we send the check?

Date: Today's date

Signature: _____

For questions or comments, contact:

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