NON-EMPLOYEE TRAVEL REIMBURSEMENT CLAIM

STATE OF NORTH DAKOTA

SFN 10230 (1-2019)

TYPE OR PRINT

● = Attach Receipt(s)

Name			Date Submitted	
Address		City	State	ZIP Code
Name of Board or Commission			Meeting/Seminar Date(s)	
TRAVEL TIME	Date of Departure From Home	Time of Departure From Home ☐ AM ☐ PM	Date of Return To Home	Time of Return To Home ☐ AM ☐ PM

INSTRUCTIONS

Enter amount of expenses that you incurred in block to the right. Do not include automobile mileage unless you drove your own vehicle. Reimbursement is 58¢ per mile in North Dakota, 58¢ per mile to a geographic point 300 miles each way from the borders of the state, and 18¢ per mile for the remaining distance.

Receipts must be attached to this form for all costs indicated by "●". Actual receipts are required; copies of credit card slips are not acceptable.

Lodging for in-state is reimbursed at actual cost up to 90% of GSA rate/day plus additional state and local taxes applicable to the GSA rate; out- of-state is actual cost.

"*Other*" costs must be explained and receipt(s) attached.

Commercial Transportation Expense	●	$
Taxi Fare (Receipt If Over $10.00)	●	$
Registration Fee (If Paid By You)	●	$
Lodging	●	$
Other - Explain:	●	$
Automobile Mileage (Round Trip)		
Automobile Mileage (Out-Of-State)		

Were meals included in registration fee? ☐ No ☐ Yes - Which?	Number of Breakfasts	Number of Lunches	Number of Dinners
Explanation of Travel and Other Costs			
ATTACH COPY OF MEETING ANNOUNCEMENT	Signature		

BOTTOM SECTION FOR USE BY PROCESSING AGENCY ONLY

	IN NORTH DAKOTA				OUTSIDE NORTH DAKOTA			
MEALS	BREAKFAST $7.00	LUNCH $10.50	DINNER $17.50	SUB TOTAL	BREAKFAST * 20%	LUNCH * 30%	DINNER * 50%	SUB TOTAL
Number of Meals								
No. X Rate = Cost								
LODGING	*ACTUAL COST UP TO 90% OF GSA RATE/ DAY PLUS STATE AND LOCAL TAXES*				*ACTUAL COST/DAY*			
	Rate X Days =				Rate X Days =			
MILEAGE	Miles @58¢ =				Miles @58¢ =		Miles @18¢ =	

* Percentage of GSA Rate.
Continental U.S. = Applicable GSA Rate.
Canada, Alaska, Hawaii = Applicable rate for federal employees.
All other International Travel = Applicable rate for federal employees.

	TOTALS
Meals	$
Lodging	$
Mileage	$
Commercial Transportation	$
Taxi Fare	$
Registration Fee	$
Other	$
TOTAL CLAIM	$

Business Unit	Department	Account
Agency Approval (Authorized Signature)		Date Approved