



MEETING AND TRAVEL EXPENSE REPORT

Gift-in-Kind Form 2015 - 2016

Contributor's Name _____ Date _____

Address _____

Event Name:	Date	Date	Date	Date	Date	Total
Air, Bus, Rail Fares * From: To:						
Automobile Mileage @ \$.14 From: To: Total Miles:						
Lodging*						
Miscellaneous (Explain)						
Grand Total:						

* Receipts required for these items

This is a correct statement of my personal expenses incurred while donating my time and services to the Sigma Tau Gamma Foundation Inc. for educational and/or fund raising activity.

Signature _____ Date _____

The above contribution is hereby approved and accepted as a "Gift in Kind" to the Sigma Tau Gamma Foundation, Inc. this _____ day of _____, _____.

Authorized Officer _____

Instructions: Complete this form in duplicate and return both copies to the Sigma Tau Gamma Headquarters, P. O. Box 54, Warrensburg, Missouri 64093-0373. Upon approval a signed copy will be returned to you for your records and the other copy retained for the Foundation's record.