



**Associates of Vietnam Veterans of America, Inc.**  
 8719 Colesville Road, Suite 100 | Silver Spring, MD | 20910-3919  
 Telephone: 301-585-4000 | Main Fax: 301-585-0519

**EXPENSE REIMBURSEMENT FORM**

Attach all receipts or scan them as a PDF, and mail or email with this form. **We pay only when there are receipts.**  
 NOTE: All non-travel requests must be turned in within 45 days of the expense. Travel expenses must be turned in by 30 days after travel is completed. **Form and receipts are sent to the AVVA National Treasurer & the VVA Finance Dept.**

CHECK HERE FOR REIMBURSEMENT  CHECK HERE FOR ADVANCE FUNDS

NAME: \_\_\_\_\_ POSITION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
Street City State Zip

PHONE: \_\_\_\_\_ ALT PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

PURPOSE OF EXPENSE: \_\_\_\_\_

DATE FORM SUBMITTED: \_\_\_\_\_

IF FOR TRAVEL: Depart From: \_\_\_\_\_ Destination: \_\_\_\_\_

Depart Date: \_\_\_\_\_ Return Date: \_\_\_\_\_

Mode of Transportation: Airline  Vehicle  Other

**EXPENSES**

		TOTAL	FINANCE USER CODE
1	Travel Details: _____	\$ _____	_____
2	Per Diem Calculation: Days X \$50.00 per day	\$ _____	_____
3	Hotel / Lodging: _____	\$ _____	_____
4	Misc. Office Supplies: _____	\$ _____	_____
5	Postage / Shipping: _____	\$ _____	_____
6	_____	\$ _____	_____
7	_____	\$ _____	_____
8	_____	\$ _____	_____
9	_____	\$ _____	_____

**Grand Total:** \$ \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

*Must be approved by the President or the Treasurer*

Approved by: \_\_\_\_\_ Date Approved: \_\_\_\_\_

Notes:

Scan form and email to: [joblum2@aol.com](mailto:joblum2@aol.com) and [payables@vva.org](mailto:payables@vva.org)