

International Collegiate Sales Competition

Expense Reimbursement Request

READ: Sales and Marketing Education Foundation, Inc. (SMEF) will reimburse each University represented at the ICSC for travel (flight or mileage but not both, economy round trip, reservations must be made at least 3 weeks before arrival date). There should be no reimbursements for qualifying hotel accommodations as they are covered up front by the Master Account. See website for complete details regarding lodging. **IRS requires ITEMIZED RECEIPTS** showing the **airfare payment along with the FULL AIRFARE ITINERARY** in order to process the reimbursement. In-State Mileage will be calculated based on the Florida Department of Transportation Mileage Viewer. **Documentation to support mileage claim is required.** Each unique PAYEE should complete a separate form. *You MUST BE registered as the Faculty Coach (maximum 1) and or Role-Play Competitors (maximum 2)/Sales Management Competitors (maximum 2) to qualify for reimbursement!* Forms must be submitted no later than **Friday, November 25, 2022** to Shannon Young by email styoung@business.fsu.edu, fax (850) 645-0009, or by mail to this address (see below). **(Please note: ONCE RECEIVED, Requests may take up to 8 weeks to process), so BE SURE to indicate the appropriate address for mailing at that time.**

Shannon Young
Sales and Marketing Education Foundation
400 Capital Circle SE, Ste 18 #262
Tallahassee, FL 32301

Date Submitted: _____

College or University Name: _____

Contact Name: _____ Telephone: _____ Email: _____

EXPENSES:

- Airfare \$ _____ **OR**
- Mileage _____ x \$.445 per mile = \$ _____ (Mileage paid is \$.445 per mile.)

Signature: _____

FORM MUST BE COMPLETED IN ITS ENTIRETY TO QUALIFY FOR REIMBURSEMENT.

(Any requests submitted after November 25, 2022, will be subjected to a 50% penalty. Requests will not be accepted after Friday, December 9, 2022.)

Directions

Incomplete paperwork will further delay processing time.

Complete Reimbursement Requests Include

If you are **Driving**, submit **ALL** the following items:

1. Completed **AND** Signed Reimbursement Form.
2. MapQuest or similar documenting the mileage and route traveled.

If you are **Flying**, submit **ALL** the following items:

1. Completed **AND** Signed Reimbursement Form.
2. **FULL** Airline Itinerary.
3. Receipt showing payment **AND** purchasing transaction. For example: XXXX XXXX XXXX 0123 **or a** Bank statement showing the matching payment deduction.

Reimbursement Payment Method Preference

What payment method do you prefer for reimbursement (check one)? Check **or** Venmo

IF Check complete Section 1. **If** Venmo, complete Section 2

Section 1 – Check Request

Payee – Make the check payable to: _____

Provide **FULL Mailing address**

Mail the check to: _____

Section 2 – Venmo Request

Payee – Venmo Name: _____ Last 4 digits of your phone number: _____

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