

International Collegiate Sales Competition

Travel Expense Reimbursement Request

READ: IRS requires ITEMIZED RECEIPTS showing the **airfare payment along with the FULL AIRFARE ITINERARY** to process the reimbursement. No pictures, attach the FULL receipt or PDF document. 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. Forms must be submitted no later than **Friday, November 22, 2024** to Shannon Young by email styoung@fsu.edu or fax (850) 645-0009. You may also mail your form and documentation to this address (see below). **(Please note: ONCE RECEIVED, Requests may take up to 8 weeks to process.)**

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: _____

RP Competitor Name: _____ RP Competitor Name: _____

SMC Competitor Name: _____ SMC Competitor Name: _____

Faculty Coach Name: _____

EXPENSES:

- Airfare \$ _____ **OR**
- Mileage _____ x \$.655 per mile = \$ _____ (Mileage paid is \$.655 per mile per the State of Florida.)

Signature: _____

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

(Any requests submitted after November 22, 2024, will be subjected to a 50% penalty. Requests will not be accepted after noon on Friday, December 6, 2024.)

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. *Itinerary and Receipt may be all in one.

Reimbursement Payment Method Preference

What payment method do you prefer for reimbursement (check one)?

_____ **Zelle** _____ **Venmo** **OR** _____ **ACH Deposit**

IF Zelle, complete Section 1

IF Venmo, complete Section 2 (Maximum Request for Venmo is \$1,000)

IF ACH Deposit complete the ACH deposit form and return with **verifying documentation** (voided check or bank verification letter).

Section 1 – Zelle Request

Payee – email: _____ **AND** Telephone: _____

Section 2 – Venmo Request

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

For ACH Deposit

Complete the attached ACH Direct Deposit form and submit via NIFTY or secured method along with verification documentation to styoung@fsu.edu.

**(Any requests submitted after November 22, 2024, will be subjected to a 50% penalty.
Requests will not be accepted after noon on Friday, December 6, 2024.)**

DIRECT DEPOSIT AUTHORIZATION FORM

Owner/Agent: _____

University Name: _____

Address: _____

City, State, Zip Code: _____

Phone Number: _____

Authorization

I hereby authorize the Sales and Marketing Education Foundation, Inc. to initiate credit entries for the International Collegiate Sales Competition travel reimbursements to my account with the financial institution I have listed. I have enclosed a copied voided check or documentation showing that I am the account holder.

I understand the direct deposit will continue until the University Name above terminates it for any reason or until the University Name above receives written notice of termination from me in such time and manner as to afford the University Name above a reasonable opportunity to act on such request.

Signature of Owner/Agent

Date

Bank Name: _____

Bank Routing #: _____

Bank Account #: _____

Choose Account Type: ___ Savings ___ Checking

Complete this form and return with your account verification documentation information.

If you have any questions, please send an email to Shannon Young styoung@fsu.edu or call (850) 644-9657. For secured transmittal, please use NIFTY, <https://nifty.fsu.edu/>