PRISM Affiliate Risk Captive

Travel Expense Reimbursement Form

Entity / Agency	Claimant Name

Payee Address (Entity) (Street, City, State, ZIP)	Payee Address (Claimant) (Street, City, State, ZIP)

Meeting / Committee	Date of Meeting	Location of Meeting

Claimant Signature	Signature Date

Meals (Per Diem Max: Breakfast $22.00 | Lunch $23.00 | Dinner $36.00 | Daily Max $81.00)

Date	Breakfast ($)	Lunch ($)	Dinner ($)	Daily Total ($)	Payable to Entity ($)	Payable to Claimant ($)
Ground Transportation						
Mileage (	miles × $0.760) =					
Car Rental						
Gas						
Rideshare / Taxi / Parking Fees / Toll Fees						
Air Travel						
Airfare/Baggage Fees (coach rate only)						
Lodging						
Lodging (single occupancy rate)						
Other Incidental Expenses						
Miscellaneous / Other (describe below)						
Description:						

	Total Meals	Total Ground Trans.	Total Air Travel	Total Lodging	Total Other Incidentals
Entity					
Claimant					

Receipts required for all expenses over $25. PRISM will not reimburse bar expenses and alcohol gratuities. Reduce the meal per diem if PRISM or the conference provides a meal. Air travel reimbursed at coach rates only.

	Payable to Entity ($)	Payable to Claimant ($)
Grand Total		

Please submit the completed form and receipts to: **accountspayable@prismrisk.gov**
75 Iron Point Circle, Suite 200, Folsom, CA 95630

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