Arizona Library Association
Speaker Reimbursement Request

Name: __________________________ Telephone: __________________________
Position: __________________________ Fax: __________________________
E-mail: __________________________
Address: __________________________
Event Attended: __________________________

Please complete this form and submit receipts to AzLA:

AzLA
950 E. Baseline Rd. #104-105
Tempe, AZ 85283

Airfare:
Air transportation shall be at the lowest available coach, economy, or discount
fare that will get the traveler to the destination in the most reasonable time frame.
Please see AzLA Travel Guidelines.

$ __________________

Hotel:
A traveler attending a conference or other formal meeting may be
reimbursed at the rate agreed to in the contract.

$ __________________

Meals (Per Diem):
Per Diem amounts are based on GSA guidelines.
Meals included in event are not reimbursable.
Current FY 2015 rate for Flagstaff, AZ: $46/day

$ __________________

Ground Transportation:
Ground transportation shall be at the lowest available shuttle, economy, or discount
fare that will get the traveler to the destination in the most reasonable time frame.
Please see AzLA Travel Guidelines.

$ __________________

Additional Expenses:
Charges related to AzLA business. Please see AzLA Travel Guidelines.

$ __________________

Honorarium:
Please enter your requested Honorarium:

$ __________________

TOTAL: $ __________________

Signature: __________________________ Date: __________________________

Please make reimbursement check payable to: __________________________