



TD Expense Report

TD Name: _____ Event: _____

Host Program: _____ Date(s): _____

- **Lodging**

- Not required/requested
- ROC Provided and covered expense
- TD provided and needs reimbursement

- Amount _____

- Receipt attached

○ Total Lodging _____

- **Mileage**

- 2022 IRS rate is .58
- Miles _____ x .58

○ Total Mileage _____

- **Meals**

- Breakfast \$8, Lunch \$10, Dinner \$20
- Breakfast x _____
- Lunch x _____
- Dinner x _____

○ Total Meals _____

- **Other**

- Other: _____

○ Total Other _____

- **TD Stipend**

- Reimbursed to ROC from IMD at \$120/day
- \$120 x _____ Days

○ Total Stipend _____

○ **Grand Total** _____

TD Signature: _____ ROC Signature: _____