



Minnesota Technology and Engineering Educators Association Reimbursement Voucher

(Type or print legibly please!)

Date: _____
 Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____

Event Description: _____

100 – Meals:	_____
200 – Mileage:	\$. <u> .45 </u> (per mile) x _____ miles	_____
200 – Travel Expense:	_____	_____
300 – Phone:	_____
400 – Lodging:	_____
500 – Banquet:	_____
600 – Postage:	_____
700 – Honorarium:	_____
800 – Supplies:	_____	_____
800 – Supplies:	_____	_____
800 – Supplies:	_____	_____
900 – Miscellaneous	_____	_____
900 – Miscellaneous	_____	_____
900 – Miscellaneous	_____	_____
900 – Miscellaneous	_____	_____
 Total:	_____

Please include copies of all receipts and invoices with this voucher.

Signature of applicant: _____ Date: _____

The MTEEA will not issue a check for a Repayment Voucher without the signature of the President. Forward to the President of the MTEEA for authorization.

(MTEEA use)

Authorization: _____ Date: _____

Ryan Stanley, President
 S:(507)460-1800
 ryan.stanley@austin.k12.mn.us

Dr. Kurt Helgeson, Executive Director
 St. Cloud State University
 720 Fourth Ave South
 St. Cloud, MN 56301
 krhelgeson@stcloudstate.edu

Mike Sandell, Treasurer
 460 Briar Lane
 Taylors Falls, MN 55084
 (651) 465-4521
 mteeatreas@gmail.com

Date paid: _____ Check No.: _____ Account No.: _____