

## 2016-2019 READY TO READ TRAINING TRAVEL REIMBURSEMENT REQUEST



Date:	_			
Your Name:	Library Affiliation:			
Name of Training:	: Date of Training			
•	Payable to:			
This is a (select ONE) Person Institution				
City:	State:	Zip:		
Traveling From	Traveling To	Mileage Round Trip	Total	
			\$	
This form is for participants from FLLS member libraries that attended a training class for Ready to Read at New York State Libraries to receive reimbursement for mileage.				
A total of \$100 per year, per member library is available for the 3-year grant cycle.				
Mileage is calculated by the IRS Standard Mileage Rates for that year under the Business Category: <a href="https://www.irs.gov/tax-professionals/standard-mileage-rates">https://www.irs.gov/tax-professionals/standard-mileage-rates</a>				
In order to receive payment:  □ Proof of mileage document (printout from Google Maps, Mapquest, etc.)  □ An evaluation of the training must be submitted.				
Please return completed form and mileage documentation to the Finger Lakes Library System Attn: Youth Services, 1300 Dryden Road, Ithaca, NY 14850.				
PAYMENT AUTHORIZ	ZATION:			
	Fraining Cohort Date:			
Executive Director			Date:	
Business Manager Date:				
Approved Evaluation Submitted Denied (Reason)				