BOARD OF DIRECTORS MEETING

Meal Expense Reimbursement Template

Claimant Name:		**Meeting Date:**	
Committee/Board:		**Meeting Location:**	
Purpose of Meal:			

ATTENDEES LIST (BOARD MEMBERS & GUESTS)

Attendee Name	Affiliation / Title

EXPENSE ITEMIZATION

Date	Establishment / Vendor	Description (Breakfast, Lunch, Dinner, etc.)	Receipt Attached	Amount

Subtotal	
Tax	
Gratuity / Tip	
Total Reimbursement	

Claimant Signature Date

Authorized Approver Signature Date