

# NYSNA Delegate (or Alternate serving as Delegate) Expense Report for 2023 Convention

<b>Name:</b>				<b>Purpose &amp; Name of Meeting:</b> 2023 Convention							<b>Date(s) of Travel:</b>									
<b>Address:</b>				<b>Facility/Employer:</b>																
<b>City/State/Zip:</b>				<b>Location:</b> Sheraton New York Times Square Hotel																
Date				Miles or Mode of Travel	Transport Cost Miles @ .655	Taxi	Parking /Tolls	Lodging	Meals			Misc. Reg. Fee	Reimbursement Source Category:  Delegate Expenses (or Alternate serving as Delegate)							
	From	To	To						Breakfast	Lunch	Dinner									
<b>Total cash &amp; personal charge items</b>														<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Total Cash &amp; Personal Charge Items</td> <td style="padding: 2px;">\$</td> </tr> <tr> <td style="padding: 2px;">Less: Non-Reimbursable Expenses</td> <td style="padding: 2px;">\$</td> </tr> <tr> <td style="padding: 2px;">Balance Due</td> <td style="padding: 2px;">\$</td> </tr> </table>	Total Cash & Personal Charge Items	\$	Less: Non-Reimbursable Expenses	\$	Balance Due	\$
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Less: Non-Reimbursable Expenses	\$																			
Balance Due	\$																			

Member's Signature \_\_\_\_\_ Date \_\_\_\_\_

For NYSNA Office use:

Approver \_\_\_\_\_ Date \_\_\_\_\_

Charge to: \_\_\_\_\_

Did you have a roommate? \_\_\_Y\_\_\_N

Was your roommate a \_\_\_NYSNA Member?

&/or \_\_\_a Conv. Delegate?

Roommate name: \_\_\_\_\_

**To be filled out by roommate:**

I (roommate) did not pay for room \_\_\_\_\_ OR

I (roommate) paid ½ and will submit expense \_\_\_\_\_

**Roommate Signature:** \_\_\_\_\_

## NYSNA Convention 2023 - Delegate Reimbursement Policy

**All expenses must be itemized and substantiated by receipts; unsubstantiated expenses will not be reimbursed. If a receipt is unattainable, please provide an explanation on the expense voucher and reimbursement will be considered.**

**Hotel Accommodations:** For members seated as Convention Delegates that live or work (NYSNA facility) two hours or less from the Convention venue: One night hotel accommodation for the night of Monday, October 23 booked through the NYSNA designated room block at the Sheraton Times Square New York hotel at the double occupancy rate when sharing a room with another NYSNA member may be reimbursed.

**For members seated as Convention Delegates traveling more than 2 hours (from their NYSNA facility or home) to the Convention location:** Two-nights of hotel reimbursement (Sunday, October 22 and Monday, October 23), booked through the NYSNA designated room block at the Sheraton Times Square New York, at the double occupancy rate when sharing a room with another NYSNA member may be reimbursed.

**For members seated as Convention Delegates that live or work in remote areas** with limited travel options a third night will be considered for reimbursement. Delegates must contact Meeting and Convention Planning prior to booking hotel and travel for approval. **Members must cancel the room reservation if the room will not be used. Hotel cancellation fees will not be reimbursed unless the association cancels the meeting or event.**

**Transportation:** NYSNA may provide transportation at various facilities and locations should the demand justify the expense. Seated Convention Delegates that live or work in areas where NYSNA does not provide transportation may be reimbursed for a round trip of the most economical and reasonable means of transportation available when submitted with a receipt including the date of travel and cost.

For seated Convention Delegates that live or work where NYSNA does not provide transportation and choose to drive, mileage may be reimbursed (at the IRS rate) up to the amount up to the rate of the least expensive means of the most economical and reasonable means of transportation available. Parking may be reimbursed for up to \$85 per day. Tolls may be reimbursed when a receipt is provided. Gasoline costs will not be reimbursed as they are factored into the mileage reimbursement rate.

Seated Convention Delegates that live or work in remote areas may be eligible for airfare reimbursement with pre-approval by contacting the NYSNA's Meeting and Convention Planning department. Convention delegates that work in areas where NYSNA does not provide transportation, tolls (must provide receipts) and mileage at the IRS rate will be reimbursed. Gasoline costs will not be reimbursed.

**Meal Reimbursement:** For delegates that are approved for overnight accommodation, meals outside of the Convention will be reimbursed for up to the IRS per diem rate of \$79. Note: Alcoholic beverages are not reimbursable. There is no reimbursement for meals when NYSNA provided a meal.

**Registration Fee:** Delegates may submit for reimbursement of the registration fee on their expense voucher by providing a copy of the paid invoice from NYSNA.

**Expense vouchers must be received no later than 90 days after the last day during which the activity took place.** Expenses received after this date will not be reimbursed.

Please return to: New York State Nurses Association  
Attn: Accounting  
155 Washington Ave  
Albany, New York 12210

