

MEMBERSHIP DEVELOPMENT GRANT MILEAGE CLAIM FORM

Starting & Ending Locations should be the Lions home address and the event location address.

For round trip travel enter each way on a separate line.

Make sure to mark if the distance traveled is in miles or km.

Please do not calculate the mileage. LCI staff will calculate and convert total to the correct currency.

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Line	Date of Travel	Lions Name	Lions Title	Starting Location	Ending Location	Miles / km	US\$.50/mile US\$.31/km	Totals	
1	11-Apr-23	Mary Smith	District Governor	Oakbrook, Illinois USA	Lansing, Michigan USA	230.90			
2	11-Apr-23	Mary Smith	District Governor	Lansing, Michigan USA	Oakbrook, Illinois USA	230.90	K	1	
3									
4		For round trip travel enter					Do not calcul	ate amount or	
5		each way on a separate line.							
6						convert to correct currency.			
7				1	1			•	
8									
9									
10									
11									
12									
						461.80	0.00		
						401.00	0.00		
Approved expenses will be reimbursed at the rate of 75% of the total approved expenses incurred unless other expenses are reported that equate to the 25% funding match requirement.						Expense Total		0.00	
						Total Reimbursable			
						(10700			
						Tyn	e of Currency		
Notes									
	•								
			Starting Location Echanics Coation Echanics Coati						
Reimbursement. I understand that by virtue of signing this expense claim, it becomes a part of the association's official records and may be subject to review by parties normally									
allowe	allowed to make such inspections.								
		District/MD				Form W-9 su	bmitted:	Yes No	
		Grant Administrator Signature		Date	_	EI	N#:		
		_							
	Distric	ct Governor/Council Chairperson	Signature	Date	_	IR	C#·		
District Governor/Council Chairperson Signature				Duto		ii.			
	FOR LOURSE ON V								
				LIOD Tarak			-1-	T-1-1	
		USD Total New Currency Rate Total							

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