Field Trip Grant Reimbursement Voucher -- **2011**

Group Name [ ] Funding Authorized [$]

This information indicates total cost PAID OUT which were associated with the trip to LBL in the categories indicated.

LBL use only… Receipt Verified Data
Transp…….$ _____
Admissions
NS…….$_____
GP PL ……..$ _____
HP…….$ _____
Other…….$ _____
BS……$ _____
Total…….$ _____

Transportation Costs (to get to LBL NRA)
--Vendor _____
--Cost $ _____
Itemized **Receipt** is attached (including check number and paid amount)

Admission Costs (to access programs at LBL NRA)
--Vendor Land Between The Lakes, National Recreation Area
--Cost $ _____
Itemized **Receipt** is attached (showing admission cost and number of admitted persons)

Food Costs (consumed at Brandon Spring for overnight visitors)
--Vendor _____ (**authorized for BS food only**)
--Cost $ _____
Itemized **Receipt** is attached

Housing Costs (associated with Bradon Spring Dorm use for overnight visitors)
--Vendor _____(**authorized for BS use only**)
--Cost $ _____ ---Number of Nights at BS _____ -- Number of Dorms Used _____
Itemized **Receipt** is attached

Objective Data
Participants # Children ____ # Teachers ___ # Others ___
Facilities Visited (please mark) HP [ ] NS [ ] PL [ ] BS [ ] Other _____

We **need digital pictures** of the visit to be sent to jtaylor@friendsoflbl.org. We need to be able to show funding partners the results of the program. We ***may*** want to post them on our website.

Send Reimbursement Check to the following address:
Change the following if needed on this sheet as you return it. This is the address where we will send check.
Organization Name [ ]

Address [ ]

City, State, Zip [ ], [ ] [ ]

Phone Number _____

Email Address of Administrator _____

Email Address of Teacher (1) _____

Email Address of Teacher (2) _____

Email Address of Teacher (3) _____

Email Address of Teacher (4) _____