

Field Trip Grant Reimbursement Voucher -- 2010

Group Name [_____] Funding Authorized [\$ _____]

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

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 \$ _____

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@friendsofbl.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:

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) _____