



# The New York State Society of Anesthesiologists, Inc.

## Expense Voucher

Reimbursement for expenses that are unsubstantiated (without receipts) must be reported to the IRS on a 1099, if cumulative amount totals more than \$599 in a calendar year.

Name \_\_\_\_\_ Social Security or Tax ID # \_\_\_\_\_

Address \_\_\_\_\_  
(Street Address)

\_\_\_\_\_  
(City) (State) (Zip)

### Meeting Attended:

- Executive Committee
- Board of Directors
- Committee Meeting
- ASA Annual Meeting
- Other: \_\_\_\_\_
- Residents Section
- NYSSA Albany Legislative Conference
- New York State Fair

Date(s) of Meeting: \_\_\_\_\_

### Method of Travel:

Round Trip Air: (Coach Fare – Attach copy of ticket)  
From: \_\_\_\_\_ To: \_\_\_\_\_ \$ \_\_\_\_\_

Round Trip Auto:  
From: \_\_\_\_\_ To: \_\_\_\_\_  
(Mileage is calculated in accordance with the current IRS allowance)

# of round trip miles \_\_\_\_\_ @ \$.50 per mile = \$ \_\_\_\_\_

Other : (please indicate method – Attach copies of receipts)  
\$ \_\_\_\_\_

### Miscellaneous Expenses: (only attach receipts if cost is over \$75.)

- Hotel: # of Days \_\_\_\_\_ \$ \_\_\_\_\_
- Airport/Hotel Parking \$ \_\_\_\_\_
- Tolls \$ \_\_\_\_\_
- Ground Transportation/Airport Car Service/Taxi(s) \$ \_\_\_\_\_
- Meals \$ \_\_\_\_\_

### Per Diem: (only if pre-authorized by the President)

- Executive Committee
  - NYSSA Board of Directors
  - ASA Board Meeting
  - MSSNY Annual Meeting
  - MSSNY Annual Meeting
  - Misc. out of state Meeting
- Multiply Per Diem \$100 by approved # of days: \$ \_\_\_\_\_  
This amount is the maximum allowable total that can be applied for reimbursement. Expenses must be substantiated by an itemized list.  
If individual items are over \$75, we will need a receipt.

Signature: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

Grand Total: \$ \_\_\_\_\_