



Ohio Olmstead Task Force Reimbursement Form

Requests for reimbursement must be received by the first Friday of the month, following the OOTF meeting in order to be paid by month's end.

Please send electronic form to: Jennifer Kucera, jenniferkucera134@gmail.com
Or by mail to: ATTN: OOTF, 670 Morrison Road, Ste. 200, Gahanna, OH 43230

Treasurer Use:

Date Received: _____

Check # _____

Date of Chk. _____

Name (Printed):	Date:
Address:	Email Address:
Name of Meeting/Event: Start From and Destination:	Date(s):

ITEM (Receipts must be with form)	Description (Date and Amount)	Actual Expense	Approved
Mileage @ 65.5 cents per mile	Odometer Start: _____ Odometer Stop: _____ Total Miles: _____	\$	
Tolls and Parking		\$	
Other Transportation		\$	
Personal Attendant Services- up to \$16.00 per hour if less than 12 hours or \$200 for an overnight stay (12 to 24 hour period)	"Receipt for Attendant/Driver Services" PCA Name: _____ Start Date: _____ Time: _____ End Date: _____ Time: _____ _____ Attendant signature; certifies that I worked these hours, I am not paid by another funder source for the same hours	\$	
Other		\$	
Total Reimbursement Requested		\$	
Signature: _____			

If you have any questions, please contact Jennifer Kucera, Ohio Olmstead Task Force Chair, at jenniferkucera134@gmail.com or call 440-990-5355.