## **APPENDIX B. Expense Report**

International Children's Advisory Network, Inc 317 Faw Lane Marietta, GA 30060



Questions? Email Finance@icanresearch.org

## **ICAN MISCELLANEOUS EXPENSE REPORT**

Please return this form to the above address or email to finance@icanresearch.org within 15 days of the expense. Receipts must be attached. Please keep copies of receipts and of this report until you have received reimbursement (may take up to 45 days).

All reimbursement items must be pre-approved in advance with iCAN before submitting.

Name of KIDS Chapter:		
Parent's Name: (first)	(last)	
Parent's Contact: (email)	(phone)	
Child's Name: (first)	(last)	
Child's Name: (first)	(last)	
Check Payable to: Name		
Street Address		
City:	State:	Zip:
All reimbursements must be pre-approved in adv sponsoring partner organization and cannot be c		
Date Description of Pre-Approve	ed Item (with receipt)	<u>\$ Amount</u>
		Total \$
-Do not forget to	attach receipts to r	<mark>eport-</mark>
Parent Signature	C	)ate
iCAN Signature	D	ate

Send this form and receipts to: info@iCANResearch.org

iCAN is not responsible for reimbursement for expenses not fulfilled such as cancelled flight, hotels, trains or/any other reservations. All reimbursements will be made after the completion of the event. iCAN must preapprove any request for reimbursement BEFORE the submission of this form. For limitation and stipend allowances, please contact iCAN at fiance@icanresearch.org for pre-approval amount. iCAN is not responsible for amounts over agreed upon stipend.