

**Midwest Reliability Organization**  
**Policy and Procedure 2: Expense Reimbursement**

**Objective**

The objective of this Policy and Procedure is to assure board and member expenses are reimbursed consistently and accurately.

**Policy**

Pursuant to Section 7.5 of the Midwest Reliability Organization (“MRO”) bylaws, the MRO board members have the right to reimbursement for actual and reasonable travel expenses for board meetings or when required to attend meetings on behalf of the Corporation.

Consistent with the annual budget of the Corporation, the board may authorize reimbursement by the Corporation for members of organizational groups (other than committees of the whole) for reasonable travel, meals, and lodging expenses for organization group meetings or for representation of the Corporation at other business meetings as authorized by the board.

The board of directors may authorize reimbursement for persons acting on behalf of the Corporation, as necessary in the interests of the Corporation.

**Responsibilities**

Each board member or authorized organizational group member is responsible for submitting reasonable travel expenses to the designated staff member of the Corporation.

The Corporation shall reimburse board members or authorized organizational group members within thirty (30) days of receiving the proper reimbursement request.

**Provisions**

The board members or authorized organizational group members shall utilize a form of reimbursement which provides enough detail to determine the nature and type of reimbursable expense. Please refer to Appendix 2-1 for a form suitable for reimbursement.



# Member Expense Reimbursement Request

Meeting Description: \_\_\_\_\_

Date: \_\_\_\_\_

Location of Meeting: \_\_\_\_\_

## Attendee Information

Name: \_\_\_\_\_

Member Organization: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Fax: \_\_\_\_\_

Member Signature: \_\_\_\_\_

Airfare / Travel: \$ \_\_\_\_\_ (mileage at IRS approved rate)

Lodging / Meals: \$ \_\_\_\_\_

Other: \$ \_\_\_\_\_

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

## Send Check to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please complete and return the request, with copy of receipts<sup>1</sup> to:

Eithne Shimasaki  
Midwest Reliability Organization  
2774 Cleveland Avenue N  
Roseville, MN 55113  
Fax: (651) 855-1712  
E-mail: [es.shimasaki@midwestreliability.org](mailto:es.shimasaki@midwestreliability.org)

<sup>1</sup> A detailed invoice from your organization is suitable documentation for reimbursement