



# ICC ABM Reimbursement Application

**NOTE: All HOA "Active Members" attending the ICC ABM qualify for registration reimbursement. Members approved for travel funds are eligible for both registration and travel reimbursement.**

**Please use this form to submit reimbursement materials relating to the ICC Annual Business Meeting or ICC Final Action Code Hearing. Attach proof of conference registration and receipts for travel, hotel and meals equaling total approved reimbursement amount.**

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

Jurisdiction (County/City Employed with): \_\_\_\_\_

Date(s) of Trip: \_\_\_\_\_ Destination: \_\_\_\_\_

*List items for reimbursement (registration, hotel, travel, meals) and attach copies of receipts.*

Registration	_____	\$ _____
Travel (air, ground, etc)	_____	\$ _____
Accommodations	_____	\$ _____
Meals	_____	\$ _____
Other	_____	\$ _____
	Total	\$ _____

*Person or jurisdiction check is "payable to"*

Address	City	State	Zip
<i>(Address Reimbursement check is to be mailed to)</i>			

**I certify these charges are accurate and that they are associated with expenses relating to the ICC ABM**

_____	_____
Signature	Date

_____	_____
Reviewed By/Approved	Date

**Return To: Travis Steerman**

**Or Email To:**

**[travis@abilenecityhall.com](mailto:travis@abilenecityhall.com)**

*C/O: City of Abilene  
Travis Steerman  
PO Box 519  
Abilene, Ks 67410*