

## Training and Exercise Reimbursement



### Application

Name of Recipient		Agency		
Which Agency is Being Reimbursed? ( <i>Name on check</i> )		Agency Federal Tax Identification #		
Address				
City, State Zip				
Lodging Date(s)				
Dates(s)	Location	Cost	Tax	Total
<u>Example</u> 8/24/24	Best Western 2630 SW 17th Pl, Redmond, OR 97756	\$125	\$12.42	\$ 137.42
Roundtrip Mileage				
Date(s)	Travel Start and Destination	Miles Traveled	Per Diem Rate	Total
<u>Example</u> 8/24/24	OEM 3930 Fairview industrial way Salem, OR 97302 to 2630 SW 17th Pl, Redmond, OR 97756	128.7 miles	\$0.22 per mile	\$28.31

Material Purchases	Item description (include item number)	Quantity	Cost Per Unit	Total
<b>Example</b> Name tag holders	Red breakaway lanyards model number S-13756R	2 packs of 24	\$24.00	\$ 64.00
			Total Reimbursement	
Organization Authority's Signature		Organization Authority's Printed Name		
ODEM Training Program Signature		ODEM Management Signature		

## INSTRUCTIONS

1. Upon completion of Training or Exercise travel or purchase, fill in name, agency and who the check should be made out to.
2. Enter name of where you stayed, cost per night, tax per night and total (per night)
3. Attach your lodging receipt, event details, and reimbursement approval by OEM.
4. Enter Mileage individually for each day that you traveled. If unsure of mileage per diem rate, leave it blank.
5. If materials were purchased, write in the type of material, the description with order number, quantity. Cost per unit, and total cost.
6. Enter the organization's authorizing contact's printed name
7. Organization Authority signs form and submits all reimbursement forms at one time
8. Submit one (1) email with all reimbursement forms and receipts attached to Oregon Emergency Management. If this reimbursement was approved through the Training Program submit by the email [oem.training@oem.oregon.gov](mailto:oem.training@oem.oregon.gov) If it was an approval through the Exercise Program use the email [oem.exercise@oem.oregon.gov](mailto:oem.exercise@oem.oregon.gov) .
9. Final two signature spaces are for Oregon Emergency Management signatures.

**The Reimbursement Processing Form must be completed and turned in with all invoices within 30 days of the completion of the training course.**