

The MONTANA DISTRICT of the LUTHERAN CHURCH—MISSOURI SYNOD

2026 CHECK REQUEST FORM

*Submit Electronically or Mail completed form & documentation to:
The Montana District – LCMS, 759 Newman Lane, Suite 2, Billings, MT 59101*

Payable to: _____ Date: _____

Mailing Address: _____

Trip To: _____ From: _____

Reason: _____

See reverse side for limits and
documentation requirements.

Day 1 Day 2 Day 3 Day 4 Day 5 Day 6 Day 7

Dates:									TOTALS
Odometer Reading & Mileage									
<i>Beginning</i>									76.0 cents/mile Total Miles X 0.760 =
<i>Ending</i>									
Mileage									
Motel									TOTAL =
Meals									TOTAL =

Other Expenses (Explain):	<u>Attach documentation for all submitted expenses (see reverse)</u>	

Mail Completed Form and Receipts to:	Total of Above	
The Montana District-LCMS 759 Newman Lane, Suite 2 Billings, MT 59101	<i>To help further the Mission of the Church, please deduct this amount from my check as a donation to the MT District</i>	
	Total Requested Payment	

X _____
Signature of Person **Requesting** Reimbursement

X _____
Signature of Person **Authorizing** Payment (Committee Chairman, District President,
Treasurer, or Board of Directors Financial Committee Member)

EXPENSE To Account: _____

In order to be good stewards of the funds given to The Montana District LCMS by congregations and individuals for the furtherance of the work of Christ, all persons submitting requests are expected to conserve costs. The following policy was developed primarily with this in mind, and also to ensure compliance with audit recommendations and IRS regulations.

District Travel Per-diem Policy

The Montana District - LCMS has a District Per Diem Travel Rate whereby each Montana District member will plan to limit travel and reimbursement costs to minimum costs necessary to effectively accomplish the objectives and mission of the Montana District. Each Traveler will attempt to limit their daily travel and expense costs in accordance with the District established annual Per Diem Travel Rate and policy for all official District travel. Receipts and/or odometer readings for all claimed expenses are required. Any costs above the established rates will require prior approval by the District Treasurer as a justifiable/reasonable excess, otherwise the expense reimbursement will be limited to maximum District Per Diem Rates. (This policy is separate and does not apply to District events and functions set up and funded for an equalization travel reimbursement policy.)

Per Diem Travel Rate

Hotel/Motel:

\$200 per night

Meals:

Meal Reimbursement will follow the current standard rate published by GSA (US General Services Administration) for Montana for breakfast, lunch, and dinner. A maximum of one alcoholic beverage will be reimbursed per day.

Mileage:

Official District travel by privately owned vehicle (POV) will be reimbursed at the established annual IRS business mileage rate corresponding to the calendar year in which the mileage was incurred. Odometer beginning and ending readings are required. The maximum mileage reimbursement will be equal to the least expensive round-trip flight from the Traveler's home to the District event destination.

Board Approved May 4, 2026

Please note:

- 2026 GSA Montana Standard Meal Rate:
 - Breakfast, \$16.00
 - Lunch, \$19.00
 - Dinner, \$28.00
 - Total maximum daily meals \$63.00
- The **IRS requires receipts or a legible scan/photo/photocopy of the receipts** to be submitted for all expenses except mileage. The **IRS requires odometer readings** to be recorded for mileage reimbursement. **Failure to provide a legible copy of the receipt or odometer readings will result in rejection of the reimbursement.**
- IRS Publication 463 requires employees to submit their expenses within “a reasonable period of time,” which is identified as 60 days. Submit all requests within the 60-day grace period.
- Tips are permitted within the reimbursement amounts if they are recorded on the receipt.
- A maximum of one alcoholic beverage will be reimbursed per day.
- In the event that seasonal rates exceed \$200 per night for lodging, contact the District Treasurer for advanced approval.
- **When possible, the Montana District expects you to room with another participant in the event.** If you choose to request a single occupancy room rather than a double, you will be expected to pay ½ the cost of a double room rate.
 - If you request double occupancy but there is no available roommate, the District will cover the whole room cost.
 - If a **guest or spouse** accompanies you, you will be expected to pay ½ the cost of a double room rate. Only guests or spouses who are required by the district to be in attendance at the event will be reimbursed for lodging or travel per diem.
 - Any exceptions to this, for instance when the attendee requires assistance due to disability, are at the discretion of the Montana District Board of Directors, and approval must be obtained prior to travel.
- **Other Expenses:** For items such as baggage fees, airline tickets, taxi/shuttle fees, etc., please list the item and amount and attach the receipt or a legible copy of the receipt.
- **Check Requests and documentation may be submitted by email to treasurer@mtdistlcms.org for your convenience, rather than by mail.**