



# GRINNELL COLLEGE

Office of Development & Alumni Relations  
733 Broad Street  
Grinnell, Iowa 50112-1690  
Direct: (641) 269-1846 or Toll Free: (866) 850-1846  
Fax: (641) 269-3222  
www.grinnell.edu

### In-Kind Travel Gifts

Expenses must be submitted within 30 calendar days of travel, and must have prior approval to be eligible for reimbursement.  
**Original receipts required.**

**Name:** \_\_\_\_\_  
(Please print your preferred title [Dr., Mr., Mrs., Ms., Etc.] and name) Class Year

**Address:** \_\_\_\_\_  
City State Zip

**Phone:** (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ **Email:** \_\_\_\_\_

**Joint Recognition**  I want to share recognition for this gift with my spouse/partner

(Please print spouse's/partner's preferred title and name)

**Auto Travel**  Personal vehicle: \_\_\_\_\_ miles x \$0.14 (reimbursement rate) = \_\_\_\_\_  
 Rental vehicle

Company Name: \_\_\_\_\_ \$ \_\_\_\_\_

Gas 1: \_\_\_\_\_ \$ \_\_\_\_\_

Gas 2: \_\_\_\_\_ \$ \_\_\_\_\_

Gas 3: \_\_\_\_\_ \$ \_\_\_\_\_

**Air Travel** Airline 1: \_\_\_\_\_ \$ \_\_\_\_\_

Airline 2: \_\_\_\_\_ \$ \_\_\_\_\_

**Other Travel** 1: \_\_\_\_\_ \$ \_\_\_\_\_

2: \_\_\_\_\_ \$ \_\_\_\_\_

**Additional Expenses** \_\_\_\_\_ \$ \_\_\_\_\_

*(i.e. parking, tolls, ferries, shuttles, etc.)* \_\_\_\_\_ \$ \_\_\_\_\_

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

Event/Purpose: \_\_\_\_\_ Date

Department/Office: \_\_\_\_\_

Contact Person: \_\_\_\_\_

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

For your gift to count in our fiscal year, and to be recognized in this year's Honor Roll of Giving, you must do one of the following:  
Postmarked by June 30<sup>th</sup> • Online by 11:59 PM CT on June 30<sup>th</sup> • By phone during regular business hours (8am – 5pm) by June 30

*Thank you for your support of Grinnell College.*

Grinnell College and its employees do not provide tax or legal advice. Donors should consult their legal and financial advisors.