

2026 SPEAKER REIMBURSEMENT VOUCHER

Washington Health Care Association is committed to providing trusted expertise, removing barriers, and bringing resources to members and their employees to enrich the lives of the residents served. We appreciate your continued support and dedication to Long-Term Care!

You must submit a reimbursement voucher form and receipts for all expense reimbursements within 30 days of event!

Speaker Name: _____

Speaker Organization: _____

Speaker Mailing Address: _____

Phone: _____

Email: _____

Please submit receipts and details for reimbursement of expenses incurred as part of your participation as a speaker. The following expenses are eligible for reimbursement based on prior approval or negotiated amounts. Any expenses exceeding these pre-approved amounts will be the responsibility of the speaker.

Expenditure	Budgeted Cost (from agreement)	Actual Cost (with receipts)
Speaker Fee		
Airfare		
Local travel		
Accommodations		
Total Reimbursement Requested:		

Reimbursement vouchers must be signed and returned within thirty (30) days of the event.

Electronic copies can be emailed to jenniferbaria@whca.org or printed documents can be mailed to 303 Cleveland Ave. SE, Suite 102, Tumwater, WA 98501.

 Speaker Name Printed

 Signature

 Date

Elena Madrid

WHCA, EVP of Education & Regulatory Affairs

 Signature

 Date