

Gateways Community Services requires original signatures on all time sheets, mileage and expense reimbursement, respite reimbursement forms.

PDF Fillable Form Instructions – Acrobat Reader Required

1. Complete all applicable areas.
2. Double check calculations.
3. Print completed form.
4. Sign completed form.
5. Submitted to Gateways for payment via methods listed below.

Timesheets and reimbursement forms may be submitted five ways:

1. Dropped off at the front desk during regular Gateways business hours (Monday through Friday 8:30am-4:30pm)
2. Dropped in the red drop box **after** business hours (located in the back of the building near the ramp entrance doorway)
3. Faxed to 603-889-5460.
4. Signed, **scanned** and emailed to your Gateways contact/account manager.
5. Mailed in an envelope to:
Gateways Community Services
144 Canal Street
Nashua, NH 03064

PLEASE MARK ALL ITEMS WITH THE NAME OF THE PERSON THAT NEEDS TO RECEIVE THEM AT GATEWAYS. THANK YOU.



Mileage & Tolls Reimbursement *(Receipts for Tolls Required)

Date of Request: _____

Employee Name: _____

Address (only if new): _____

Date	Mileage	Tolls	Description of Travel	Acct.#	Vqvcn Origin	Cost Center
Total				7401		

Other Expenses *(Receipts Required)

Date	Expenses	Description	Acct. #	Total to pay	Cost Center
Total			6534		

Receipts required for tolls and other expenses.

Requested By: _____ Check Amount \$ _____

Approved By: _____
 Director of Program

Requests received after 5:00 p.m. Monday will be processed the following Friday

Below for Finance Office Use Only

Account Number: _____
