

The Augustine Fellowship, S.L.A.A., Fellowship-Wide Services, Inc.
TRAVEL EQUALIZATION FUND (TEF) GUIDELINES

History and Purpose

In an effort to improve geographical representation at the ABC/M and create a wider group conscience, the Conference approved the Travel Equalization Fund (TEF) in 1996. This fund helps equalize travel expenses for Delegates from all parts of the world who wish to attend the annual event.

All Delegates contribute \$150.00 to the fund in addition to paying for registration fees, food and lodging. This fund is an example of working together to help build a stronger Fellowship.

If you are a Delegate who is able to come to the ABC/M because of the TEF, it is suggested that you seek out Delegates from California, and other states or countries within the 500 mile radius, to thank them. Their contributions have helped make the TEF possible.

Guidelines

1. It is assumed that Delegates traveling up to 500 miles to the ABC/M are able to do so at minimal expense. They are, therefore, not eligible for TEF money. Contributions from these Delegates make possible financial assistance to Delegates traveling longer distances. The TEF is designed to be totally self-supporting. It distributes only those funds brought in through Delegate registrations.
2. All Delegates who attend the ABM and travel over 500 miles are eligible for the TEF.
3. Delegates who want a reimbursement must submit a copy of their travel receipt(s) along with a completed TEF Request Form within 3 weeks after the close of the ABC/M:
DEADLINE is Friday, August 21, 2020.
4. Delegates who are eligible for TEF reimbursement will receive some portion of the actual cost of their travel or an economy class airfare ticket, whichever is less.
5. The maximum distribution is \$1,000.00 per Delegate.
6. Reimbursements are paid as soon as possible after the ABC/M and the TEF submission deadline.
7. A Delegate or Intergroup that has the means to meet travel costs without assistance may waive acceptance of TEF reimbursement. Such a waiver helps others in need and is greatly appreciated.

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TRAVEL EQUALIZATION FUND (TEF) REQUEST FORM
Submission Deadline—**Friday, August 21, 2020**

Sponsoring Information Intergroup or Group (Circle one)
Name _____
Mailing Address _____
City/State/Province _____
Zip/Postal Code/Country _____
Email Address _____
Phone Number (Day) _____ (Evening) _____

Delegate Information
Name _____
Mailing Address _____
City/State/Province _____
Zip/Postal Code/Country _____
Email Address _____
Phone Number (Day) _____ (Evening) _____

Payment Information
• Payment of TEF should be made to: Delegate Sponsoring Intergroup/Group Other

• Payment Method:
 PayPal address: _____
 Check (U.S. Only)
 Wire Transfer (International Only) – The following information is necessary:
 o Account Name: _____
 o Bank: _____
 o Account Number: _____
 o Sort Code: _____
 o IBAN: _____
 o BIC or SWIFT: _____

If address is different from above, please indicate name and address here.

Mail to: F.W.S. TEF Request 1550 NE Loop 410, Suite 118 San Antonio, TX 78209 USA
Fax to F.W.S.: 1-210-828-7922 **Email:** abm2020@slaafws.org