

Name: _____

Today's Date _____

Note: Can Be used for several functions.

Note: For reimbursement of expenses all original receipts must accompany this expense voucher!

All original receipts include the following: lodging, airline tickets, airport parking, parking fees, storage, supplies, vehicle rental receipt, and registration fees.

(1) VEHICLE INFORMATION						
Month/Day	Function	From	To	Miles	Rate	Amount
					\$.40 / mile	
					\$.40 / mile	
					\$.40 / mile	
					#1 Total	

Comments:

PLEASE ATTACH YOUR RECEIPTS TO COMPLETED FORM!

Meals: Actual expense of meals, not to exceed the maximum of \$20.00 in-state and \$25.00 out-of-state.

(2) MISCELLANEOUS EXPENDITURES			
Date	Function	Item	Amount
		Lodging	
		Lodging	
		Airfare	
		Airfare	
		Meals	
		Meals	
		Meals	
		Taxi	
		Parking	
		Registration	
		Phone	
		Other	
			#2 Total

(3) EXECUTIVE BOARD PER DIEM			
No. of Days	Function	Rate	Amount
		\$50 / day	
		\$50 / day	
		\$50 / day	
			#3 Total

(Add Sections 1-2-3) **TOTAL REIMBURSEMENT \$**

Do Not Write in This Space---Office Use Only

Date	Code	Function	Amount
E/B Per Diem	6950.27		
E/B Per Diem	6950.27		
			Total