

Area Committee Expense Report Form

Name: _____
 Position: _____
 Address: _____
 Phone: _____

TRAVEL

Date: _____
 Destination: _____
 Purpose of Trip: _____
 Mileage, Before: _____ After: _____ Total: _____ 0
 Gas Expense: _____
 Mileage Allowance (\$0.05/mile): _____ \$0.00
 Meals, # of: _____ Total Expense: _____
 Lodging, # of nights: _____ Total Expense: _____
 Other: _____

ORGANIZATIONAL

Phone Calls
 To: _____ Purpose: _____ Cost _____
 To: _____ Purpose: _____ Cost _____
 To: _____ Purpose: _____ Cost _____
 Copies:
 For: _____ # _____ Cost _____
 For: _____ # _____ Cost _____
 Postage:
 For: _____ # _____ Cost _____
 For: _____ # _____ Cost _____
 Other: _____ Cost _____

MISCELLANEOUS

Other: _____ Total _____
 Other: _____ Total _____

TOTAL

REIMBURSEMENT DUE..... \$0.00

Signature: _____