EXPENSE REPORT SUMMARY		RECEIP	RECEIPTS ARE REQUIRED!		
			n phone bills/indicate to whom made		
Office/Co	nmittee:				
Name:					
Address:					
DATE	DESCRIPTION (Be Specific)	EXPENSE TYPE*	AMOUNT	TOTAL	
MILEAGE	PURPOSE/DESTINATION	#OFMI.	\$	TOTAL	
		+			
CONFERE	NCE EXPENSES (Registration, Lodging):				
DATE	NCE EXPENSES (Registration, Lodging): DESCRIPTION				
			GRAND TOTAL	\$	
				•	
SIGNATURE:		Date pd:	Date pd: For		
DATE SUBMITTED:		Treasure Use	Treasurer's Check*:		
Only					
-Phone, 2	-Postage, 3-Printing, 4-Literature, 5-Misce	llaneous			