



**Vietnam Veterans of America
Colorado State Council
3139 Oak Creek DR E.
Colordado Springs, CO 809906**

Expense Report

Date: _____

ADVANCE

REIMBURSEMENT

Attach Receipts to Blank Paper -- We Pay Only When There Are Receipts

Note: All requests must be turned in **within 45 days** of the expense

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____

Budget Charged: _____

Point of Origin: _____ Destination: _____

Date: Departure: ___/___/___ Time: ___:___ Return: ___/___/___ Time: ___:___

EXPENSES

TOTALS

- | | |
|---|----------|
| 1. Travel: Air | \$ _____ |
| 2. Mileage: (accounting will compute) - Total Mileage _____ | _____ |
| 3. Per Diem: (45.00/day) | _____ |
| 4. Lodging: | _____ |
| 5. Postage: | _____ |
| 6. Telephone: | _____ |
| 7. Office Supplies | _____ |
| 8. _____ | _____ |

Grand Total \$ _____

Signature _____ Date: _____

Finance Department Use Only

Approved _____ CFO, Controller Date: _____