

DISTRICT IV BOARD OF DIRECTORS' EXPENSES

(Please attach receipts)



Name: _____ Date: _____

Position: _____ Address: _____

TRAVEL:

Date:	Event:	From:	To:	Miles	Rate	Total Mileage or Airfare
_____	_____	_____	_____	_____	30¢	_____
_____	_____	_____	_____	_____	30¢	_____
_____	_____	_____	_____	_____	30¢	_____

TOTAL TRAVEL _____

MEALS: flat \$25.00 per day, no receipts required

Dates:	Event	City	No. Days	Rate	Total
_____	_____	_____	_____	x \$25.00 =	_____
_____	_____	_____	_____	x \$25.00 =	_____
_____	_____	_____	_____	x \$25.00 =	_____

TOTAL MEALS _____

LODGING: up to \$100 per day, attach receipts

Dates:	Event	City	Total
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

TOTAL LODGING _____

OTHER EXPENSES: Amount

Other Expenses:
(please list, i.e., scholarship,
new lodge, membership, etc.)

_____	_____
_____	_____
_____	_____
_____	_____

TOTAL OTHER EXPENSES _____

TOTAL EXPENSES _____

Signature: _____