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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 2024 Expense Report | | | | | | | | | | | | | |
| Name  Agency/Board/Committee:  Date: | | | | | | | **Payable To:**  Address: | | | | | | |
| Purpose of Trip: | | | | Travel From: To: | | | | | | | | | |
| Travel Expenses | | Day 1 | Day 2 | | Day 3 | Day 4 | | Day 5 | Day 6 | Day 7 | | Total Amount | Account Number |
| ***Number of Miles*** | |  |  | |  |  | |  |  |  | |  |  |
| Mileage Calc (62 cents/mile) | |  |  | |  |  | |  |  |  | |  |  |
| Air Fare\* | |  |  | |  |  | |  |  |  | |  |  |
| Auto Rental\* | |  |  | |  |  | |  |  |  | |  |  |
| Gas,Tolls & Parking\* | |  |  | |  |  | |  |  |  | |  |  |
| Air, Rail, Bus\* | |  |  | |  |  | |  |  |  | |  |  |
| Taxi, Limousine, Uber (Incl. Tip)\* | |  |  | |  |  | |  |  |  | |  |  |
| Lodging, Hotel, Motel\* | |  |  | |  |  | |  |  |  | |  |  |
| Meals (Incl. tip)\* | |  |  | |  |  | |  |  |  | |  |  |
| Other Expenses\* | |  |  | |  |  | |  |  |  | |  |  |
|  | |  |  | |  |  | |  |  |  | |  |  |
| Honorarium | |  |  | |  |  | |  |  |  | |  |  |
| SUB-TOTAL | |  |  | |  |  | |  |  |  | |  |  |
| Other Purchases | | | | | | | | | | | | | |
| Service/Item | Date | | Attendees (if applicable) | | | | | Business Purpose | | | Amount | | Acct Number |
|  |  | |  | | | | |  | | |  | |  |
|  |  | |  | | | | |  | | |  | |  |
|  |  | |  | | | | |  | | |  | |  |
|  |  | |  | | | | |  | | |  | |  |
| **TOTAL** |  | |  | | | | |  | | |  | |  |
| Authorized By: Date: | | | | | | | | | | | | | |

\*Attach Receipts Paid by check#

Date: