



VIETNAM VETERANS OF AMERICA
WEST VIRGINIA STATE COUNCIL
TRAVEL AND/OR EXPENSE REPORT

Name: _____

Position or Office: _____

Address: _____

Travel Dates: _____

Purpose: _____

Date Approved by Delegates: _____

OR AS PER PREVIOUS (STANDING) MOTION (initial here) _____

EXPENSES

Travel:

Automobile: Miles driven _____ x \$.35 = \$ _____
Plane, Train, Bus, Taxi \$ _____
Parking \$ _____
Tolls \$ _____
Other \$ _____
Travel subtotal \$ _____

Meals _____ x _____ days = \$ _____
Lodging _____ x _____ days = \$ _____
Per Diem subtotal \$ _____

Are you willing to wave the WVSC Per Diem fees (Y) ___ (N) ___

Itemize other approved expenses
\$ _____
\$ _____
\$ _____

Were these expenses charged to WVSC Credit Card (Y) ___ (N) ___

TOTAL EXPENSES FOR WHICH REIMBURSEMENT IS REQUESTED: _____

Signed: _____ Date: _____

COUNCIL USE ONLY (Approved by either officer)

APPROVED BY: WVSC President Date: _____ Initials _____

APPROVED BY: WVSC Treasurer Date: _____ Initials _____

Check Issued By: _____ CK. # _____ Date: _____