

PENNSYLVANIA STATE COUNCIL OF LIONS CLUBS

EXPENSE ACCOUNT

NAME _____ District _____

ADDRESS _____

EXPENSES ATTENDING _____ AS _____

AT _____ DATE _____

DATE _____ BREAKFAST\$ _____
LUNCH \$ _____
DINNER\$ _____
TOTAL (\$16 Maximum, Receipts Required)..... \$ _____
HOTEL (\$50 Maximum, Receipts Required)..... \$ _____

DATE _____ BREAKFAST\$ _____
LUNCH \$ _____
DINNER\$ _____
TOTAL (\$16 Maximum, Receipts Required)..... \$ _____
HOTEL (\$50 Maximum, Receipts Required)..... \$ _____

DATE _____ BREAKFAST\$ _____
LUNCH \$ _____
DINNER\$ _____
TOTAL (\$16 Maximum, Receipts Required)..... \$ _____

CAR MILEAGE _____ MILES AT \$0.41 PER MILE \$ _____

OTHER FORMS OF TRANSPORTATION:
PRE-APPROVAL & RECEIPTS REQUIRED \$ _____

MISCELLANEOUS EXPENSES: \$ _____
(Receipts Required)
\$ _____ \$ _____
TOTAL \$ _____

DATE _____ SIGNED _____