## **PROVINCE IV**

## TRAVEL & EXPENSE REPORT

RECEIPTS (ORIGINAL) MUST ACCOMPANY ALL EXPENDITURES IN EXCESS OF \$25.00
\*\*\*EXPENSES MUST BE LESS THAN 6 MONTHS OLD\*\*\*
PLEASE TYPE OR PRINT CLEARLY

NAME										
STREET										
CITY/STATE/ZIP										
PURPOSE										
SIGNATURE & DATE										
I <del></del>					<del></del>	T				
DATE		<u> </u>	<b></b> '			<u> </u>	<u> </u>	TOTAL		
CITY		'	<u> </u> '							
						]				
BREAKFAST			<u> </u> '							
LUNCH			[ <u>'</u>							
DINNER										
ENTERTAINMENT (A)		'								
` ′										
LODGING										
LOBOLITO	<u></u>			<u> </u>		<u> </u>				
AIRFARE/TRAINFARE **	T			ī	T	ſ	1			
LOCAL TRANSPORTATION	<del> </del>	<del> </del>	<del> </del>		1	1	<del>                                     </del>			
	<del> </del>	<del> </del>	<b></b>	ļ	<del> </del>		<del>                                     </del>			
	<u> </u>	<u> </u>	<b></b>		<u> </u>	<u> </u>	<u> </u>	<b></b>		
AUTO RENTAL		<b> </b> '	<b></b>							
TOLLS	ļ	<u> </u> '	<b></b> '		ļ		<u> </u>			
PARKING		<u> </u>	<u> </u>			<u> </u>				
POSTAGE			[ <u>'</u>							
TELEPHONE & FAXES (B)										
OTHER (DESCRIBE):										
,		1	·	Ī	T					
		<del>                                     </del>	<del>                                     </del>							
		<del>                                     </del>	<del>                                     </del>				<del>                                     </del>			
		<del>                                     </del>	<del>                                     </del>				<del>                                     </del>			
<u> </u>	<del> </del>	<del> </del>	<del> </del>		<del> </del>		<del>                                     </del>			
<u> </u>	<del> </del>	<del> </del>	<del></del>		<del> </del>		<del>                                     </del>			
<u> </u>				<u>l</u>		<u> </u>				
TOTAL EVDENCES	Т			T	T	T	<del> </del>			
TOTAL EXPENSES		<u> </u>				<u> </u>				
LESS ADVANCE	:= ====									
NET REIMBURSEMENT DUE (DU	JE PROVIN	CE IV)								
				<del></del>						
REQUISTION AUTHORIZED BY					DATE					
					•					
Mail completed form with receipt	s attached	to:								
Barbara G. Mann				*Mileage Al	llowances					
413 Buffware Court						cents per i	mile			
Charleston, SC 29492 2014 - 56 cents per mile										
843-388-9512						cents per i				
** ALL ORIGINAL TRAIN/AIRFARE TICKET	r STUB(S) MUS	ST BE SUBMIT	TED IN ORDE	R FOR REIMBI	URSEMENT TO	RE PROCES	SFD**			
ALL ORIGINAL HUMAN MANAGEMENT	0.05(0,	), DE 002	125 5	· · · · · · · · · · · · · · · · · · ·	51(5 <u>2</u> 2	, 52 . 1. 5 . 2	Revised 1/1	1/2015		
(A) DETAIL OF ENTERTAINMENT	EYPENSE	e					INEVISCU I/ I	72013		
(A) DETAIL OF LITTLE TAINMENT	LAI LINGE	3								
THE OF BEROOM(O) ENTERTA			= =::TEDT	- :-:		1=				
NAME OF PERSON(S) ENTERTA	INED	PLACE	OF ENTERTA	AINMENI		BUSINESS	PURPOSE	AMOUNT		
		╙——				<u> </u>				
		1								
		<u> </u>								
		1								
		1								
		4——				-				

## (B) DETAIL OF TELEPHONE & FAX EXPENSES:

NAME OF PERSON(S) ENTERTAINED	PLACE OF CONTACT	BUSINESS PURPOSE	AMOUNT
		•	