EXPENSE REPORT

Education Department Kansas-Nebraska Conference

Name			School			
Address			Email			
City/Zip			Date Submitted			
Reason for Travel				Date		
Expenses					Amount	
Car Rental*	No. of Days					
Airfare*	Airline					
Auto Travel	Mileage	@ 42 ce	ents per mile			
Lodging*	No. of Days					
Full Per Diem No meals provide by host	No. of Days	@ \$50 p	per day			
One Meal per Day 2 meals provided by host	No. of Days	@ \$25 p	@ \$25 per day			
Fully Entertained All meals provided by host	No. of Days	@\$17 p	er day			
Conference fees	Conference Name					
Tuition	No. of Hours					
Parking*/Tolls	Explanation					
Other	Explanation					
*Attach Receipt Subtotal						
	Less Advance (if any)					
				Total		

Signature Date