



Burlington-Edison Education Association

An affiliate of the National Education Association, Washington Education Association, and
WEA Fourth Corner UniServ Council

Expense Report

Claimant: _____

Address : _____

Purpose of expense: _____

Date	Description	Transportation Mileage @\$.51(2011)	Lodging	Meals			Other	Total
				B	L	D		
				\$10	\$15	\$20		
				\$10	\$15	\$20		
				\$10	\$15	\$20		
				\$10	\$15	\$20		
				\$10	\$15	\$20		
				\$10	\$15	\$20		
				\$10	\$15	\$20		
Column Totals								
Further Explanation, if needed							Subtotal	
							Less Cash Advance	
							Total owed by you	
							Total due to you	

Claimant Signature: _____ Date: _____

Approval Signature: _____ Date: _____

FOR ASSOCIATION TREASURER USE ONLY

Date Paid _____ Check Number _____ Charged to Budget line # _____

Receipts must be attached to expense form.
Receipts required for meals in excess of allowance.