



AMVETS RIDERS NATIONAL TRAVEL & EXPENSE VOUCHER

Submitted By:

Phone Number

Date

Address:

Signature

***(All Receipts and Authorization Must be attached)**

Date	Miles	Mileage	Airfare	Other	Motel	Meals	Purpose of Trip and Destination	
		\$ -						
		\$ -						
		\$ -						
		\$ -						
		\$ -						
		\$ -						
		\$ -						
Subtotals	0	\$ -	\$ -	\$ -	\$ -	\$ -	Total	\$ -
							Advance Pay	\$ -
							Total Due	\$ -

Mileage Reimbursement Rate	\$0.36
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<u>This Section for Office Use Only</u>	Explanation of Expenses				
Mileage and or Airfare	\$ -				
Motel	\$ -				
Meals	\$ -				
Other Expenses	\$ -				
Total Authorized Expenses	\$ -				
Authorizing Officers	Signature	Date Approved	Date Paid	Amount	Check Number
				\$ -	
				\$ -	

This Document was Revised and Approved by The RNEC 5/16/2015

