Voucher #_____

C.R.E.A. VOUCHER FORM

NAME _____ DATE _____

DATE(S) EXPENSES INCURRED				
***TRANSPORTATION (Tickets)**				
_____ Miles @ ~~.20~~/mile .40 mile				
***LODGING**				
MEALS - breakfast				
- lunch				
- dinner				
*** Group Meal**				
TELEPHONE				
*** OTHER (explain)**				
TOTAL EXPENSES:				
LESS ADVANCE				
AMOUNT RETURNED				
AMOUNT DUE				

SIGNATURE _____ DATE_____

SITE OF MEETING _____

NAME OF MEETING_____

For official use only:

Check Number_____ Amount_____

Line item credited/reduced_____

Approved by_____ Date _____

*** RECEIPTS REQUIRED FOR REIMBURSEMENT**