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.	@ 42 cents per mile			
Lodging*	No. of Days					
Full Per Diem No meals provided by host	No. of Days	@ \$54 p	@ \$54 per day			
One Meal per Day 2 meals provided by host	No. of Days	@ \$27 p	@ \$27 per day			
Conference fees	Conference Name					
Tuition	No. of Hours					
Parking*/Tolls	Explanation					
Other	Explanation					
*Attach Receipt Subtotal						
	Less Advance (if any)					
				Total		
Tuition Parking*/Tolls Other	No. of Hours			(if any)		

Signature Date