MISSOURI VALLEY COMMUNITY *ACTION* AGENCY
JUSTIFICATION FOR TRAVEL EXPENSES
IN AREA TRAVEL

NAME: _____ For The Pay Period Of _____, 20____

PROGRAM: _____ DUTY STATION: _____

DATE	DUTY STATION - TO AND RETURN	ODOMETER READINGS BEGINNING - ENDING	TOTAL MILES	* MISCL.	PURPOSE
					TOTAL MISCL.
		TOTAL MILES		AT ¢ PER MILE	
				TOTAL EXPENSE	$

I do solemnly swear "or affirm" the above claim is correct and just, that the expense was necessary to the business of the corporation, that payment has been made from personal funds and that I have not been reimbursed therefore, and I have not received and will not receive from any source whatever any payment or any part thereof except as provided by law.

Approved _____, 20____

_____ By _____

Title _____

12/03 GREEN PRINTERS INC