## TRAVEL REIMBURSEMENT VOUCHER

NAN	ſE:	Date:				_			
ON	ΓE: IF REIMBURS	SEMENT IS BY PRO	OFESSIONAL DEVEI	OPMENT C	OMMITTEE I	FUNDS, PLEASE N	OTE THE FO	LLOWING:	
1. 2. 3. 4.	Lodging Limit Mileage Limit No reimburseme	imit: \$65.00/day or \$15.00/breakfast, \$20.00/lunch, and \$30.00/dinner out of state g Limit \$125/night   £ Limit \$.65/mile. Attempt to share rides, carpool, etc.   anbursement for dues to local organizations  anbursement for mileage to attend board meetings.							
	A REPORT ON T	HE ACTIVITY ATT	ENDED MUST ACCO	MPANY TH	IS FORM OR	REIMBURSEMEN	T WILL NOT	OCCUR	
OATI	E PURPOSE		DESTINATION	NO.	OF MILES	MEALS	LODGING	OTHER	
				Total: \$		Approved by:			
				Grand Total:	\$				