

Date:

JAG Kentucky Expense Report

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Employee:	
Date:	
Total Reimbursement:	\$ -

Complete and submit to supervisor. Supervisor then submits to Executive Assistant to the President. A check will by mailed Friday for reimbursements correctly requested by Wednesday.

remedition by manear mady for remindration entropy requested by wearesday.										
MILEAGE (reimbursed at	\$.54/mile; include PDF of online map)								
Round				_						
Trip?	Date	From/To		Purp	oose	Miles Traveled	Total			
							\$ -			
							\$ -			
							\$ -			
							\$ -			
							\$ -			
					Milea	ge Reimbursement Total:	\$ -			
OTHER EX	PENSES (Includ	le PDF's of receipts.)				•	· .			
Missing	Telego (metado e o o o recelposo)				Enter Admin or Pro					
Receipt?	Date	Vendor Name, Location	I	Description	for meals, enter Staff Name(s), # of Guests		Total			
Other Expenses Reimbursement Tot										
Supervisor Approval:				For Administration use only.						
Supervisor Approvai.			-	Account	Clas	Amount				
	Date:			7.0004110	Cius		7			
	Date.		_							
President Approval:										
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