## Travel Expense Voucher Northeastern District C&MA

Name:	Date	
Address:	Expense in connection with:	
		Committee
	Other:	
From to	Auto:miles @ 70¢ per mile =	
☐ One Way ☐ Round Trip	Other: ☐ Bus ☐ Train ☐ Plane	
	Lodging	
Please attach receipts and include your address above. Thanks!	Meals	
	Tolls and Other Incidentals	
	(Please itemize incidentals on back) TOTAL:	
Authorized by:	Account No	
Check No Che	eck Date	Rev. 1/25
	Travel Expense Voucher Northeastern District C&MA	
Name: Address:	Date	n with:
Address.	Expense in connectio	Committee
	Other:	Committee
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