



Statement of Reimbursable Expenses

Name: _____

Month _____ Year 20 _____

See instructions on reverse side

revision 1/8/2021

Day	Business Purpose	Auto Miles	Lodging	MEALS			OTHER - Req'd. details on reverse side		Total exp. for day
				Breakfast	Lunch	Dinner	Nature of expense	Amount	
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									
16									
17									
18									
19									
20									
21									
22									
23									
24									
25									
26									
27									
28									
29									
30									
31									
TOTALS									

Personal Car Use Allowance @ _____ ¢ per mile

ACCOUNT No. _____

Total Expenses
 Less Advances
TOTAL

I hereby certify that the above is a statement of actual and necessary expenses incurred by me while on official Casitas business.

 Date Signature

APPROVED:

 Date Manager/Supervisor Signature

 Date General Manager Signature

Group Business Meals & Entertainment

Date	Amount		Item, Place of Entertainment & City	Business Purpose, Names & Titles of Persons Entertained

Explanation of Other Miscellaneous Expenses

Date	Amount		Remarks

Instructions

- | | |
|---|---|
| <ul style="list-style-type: none"> 1. Attach receipted bills for all lodging. 2. ATTACH RECEIPTED BILLS FOR EACH SINGLE DAILY EXPENSE WHICH AMOUNTS TO \$ 25 OR MORE. 3. Post daily auto mileage in column provided, total for period, and other total mileage under Personal Car Use Allowance. | <ul style="list-style-type: none"> 4. Enter in the top section above the indicated details to support expenses for Group Business Meals & Entertainment. <p style="margin-left: 40px;">In the lower section include explanations for other miscellaneous expenses when there is not enough space on the face of the form to explain nature of expense.</p> |
|---|---|