



2009 EXPENSE VOUCHER

(Must be submitted with receipts to the Executive Director of ACNL within 30 days of the meeting)

Name: _____

Address: _____

City: _____ Zip: _____

Type of Meeting(s): 1) _____ Date(s): _____

2) _____

3) _____

Item	Description	Amount
Airfare		\$
Mileage	Mtg #1 Miles _____ x .14cents/mile =\$ _____	\$
	Mtg #2 Miles _____ x .14cents/mile =\$ _____	\$
	Mtg #3 Miles _____ x .14cents/mile =\$ _____	\$
Hotel		\$
Meals	#1 Brkfst: \$_____ Lunch: \$_____ Dinner \$_____	\$
	#2 Brkfst: \$_____ Lunch: \$_____ Dinner \$_____	
	#3 Brkfst: \$_____ Lunch: \$_____ Dinner \$_____	\$
Parking/Tolls		\$
Taxi/Shuttle		\$
Miscellaneous Expenses	(Gratuities, telephone, other approved expenses)	\$
TOTAL		\$

Signature: _____

Date: _____

Please sign, attach receipts and send to: ACNL, 3835 North Freeway Blvd., Suite 120, Sacramento, CA 95834