

Traveler Name: _____
 Street Address: _____
 City, State, Zip: _____

TRAVEL AND EXPENSE REPORT
 Episcopal Diocese of Western Michigan, Attn: Tammy Mazure
 535 S. Burdick St., Suite 1, Kalamazoo, MI 49007

Date (M/D/Y)	Description	Miles	Total Mileage @ \$.30/mile	Lodging	Meals	Supplies	TOTAL
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TOTAL		-	\$ -		\$ -	\$ -	\$ -

Reimbursement due Traveler

INSTRUCTIONS:

- Please type or print clearly. Make additional copies of this form as needed.
- Expenses can be reimbursed only by submitting *original receipts or stubs for all expenditures*. Please submit all receipts and this completed form and return to Tammy Mazure.

Expenses that are not subject to reimbursement

Any expenses not specifically addressed in the Guidelines as reimbursable must have prior written explanation and approval. Non-reimbursable expenses include but are not limited to the following: Spouse's travel expenses; dependent care; pet care; supply clergy to substitute for clergy on official business; lost pay; use of frequent-flyer miles; luggage purchase or replacement; unofficial (personal) entertainment; in-room movies; barber and beauty services; newspapers and magazines; sightseeing; medical services; motor vehicle fines; "no show" charges for hotels, car rental and limousines; charge card late fees and expenses.