

Medical College of Georgia

EXPENSE REPORT

Name _____ Title _____
 Department/ _____
 Headquarters _____ Division _____ MCG Ext _____
 (City and State)
 Residence _____ Date From _____ To _____
 (City and State)

	ACCOUNT	FUND	DEPARTMENT	PROGRAM	CLASS	PROJECT			
DATE	Time Departed	Location/Points Visited			DETAILS OF SUBSISTENCE (ATTACH LODGING RECEIPT)				Totals
	Arrived				B'fast	Lunch	Dinner	Lodging	
									0.00
									0.00
									0.00
									0.00
									0.00
									0.00
									0.00
									0.00
									0.00
									0.00
									0.00
									0.00
									0.00
									0.00
Totals				\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
EXPLAIN ANY UNUSUAL AMOUNTS FOR SUBSISTENCE:									
STATE USE MILEAGE 0.0 _____ MILES @ 0.585 _____ (Must be supported by automobile mileage record on reverse side)								\$0.00	
COMMON CARRIER, TAXI/LIMOUSINE (Explain in section on reverse side)								\$0.00	
TOTAL TRAVEL EXPENSE								\$0.00	
MISCELLANEOUS EXPENSES (Explain in section on reverse side)								\$0.00	
GRAND TOTAL								\$0.00	

"I do solemnly affirm under criminal penalty of a felony for false statements subject to punishment by not less than one year nor more than twenty years or penal servitude, that the above statements are true and I have incurred the described expenses and State use mileage in the discharge of my official duties for the State and have not been reimbursed and have not filed nor will I file for reimbursement from any other source, for said expenses.

APPROVED _____ **SIGNED** _____ **DATE** _____

Medical College of Georgia

TRAVEL EXPENSE STATEMENT

DATE	COMMON CARRIER, TAXI/LIMOUSINE <small>(Explain, attach receipts for common carrier)</small>	Amount	DATE	MISCELLANEOUS <small>(Explain, attach receipts except for tele. and teleg.)</small>	Amount
	TOTAL AMOUNT will automatically calculate and enter on page one	\$0.00		TOTAL AMOUNT will automatically calculate and enter on page one	\$0.00

AUTOMOBILE MILEAGE RECORD

DATE FROM _____ DATE TO _____

GEORGIA LICENSE NUMBER OF CAR _____ (Make separate report for each car used)

Prepare daily, using a separate blank for each day's State use travel and for each departure from headquarters, and hold for submission with travel expense statement. If recording space for period covered is insufficient, use additional sheets, signing last sheet only.

DATE	DAILY TRAVEL <small>(Points Visited)</small>		ODOMETER READING		MILES TRAVELED		
			Starting	Ending	Daily Miles	Personal Use	State Use
	FROM	TO			0.0		0.0
	FROM	TO			0.0		0.0
	FROM	TO			0.0		0.0
	FROM	TO			0.0		0.0
	FROM	TO			0.0		0.0
	FROM	TO			0.0		0.0
TOTAL MILES TRAVELED					0.0	0.0	0.0
State use miles will automatically total and will calculate at State mileage rate and enter on page one							