

# Elmira Township Expense Report

Name \_\_\_\_\_ Date \_\_\_\_\_

<b>Position/Department</b>	Supervisor _____	Trustee _____
	Clerk _____	Fire Auth. _____
	Treasurer _____	Planning Comm. _____
	Assessor _____	

<b>Expenses</b>	<b>Totals</b>
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Mileage rate \_\_\_\_\_ x miles \_\_\_\_\_ = \_\_\_\_\_

**Reimbursements:**  
**Attach invoice/List below**

	\$	
	\$	
	\$	
	\$	Total Reimb\$ _____

**Lodging** \_\_\_\_\_ \$ \_\_\_\_\_

**Meals** \_\_\_\_\_ \$ \_\_\_\_\_

**Phone** \_\_\_\_\_ \$ \_\_\_\_\_

**Classes** \_\_\_\_\_ \$ \_\_\_\_\_

**Meetings** \_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_ Total Mtgs \$ \_\_\_\_\_

**Other** \_\_\_\_\_ \$ \_\_\_\_\_

**Total of Expense Report \$ \_\_\_\_\_**