	Ext	oense Rep	port		Name						
King's College					Address						
133 North River											
					City	ST, Zip					
heck Payal					,				, , -		
Purpose:											
ocation(s):											
	enses Incurred:			Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Total
uic(o) Expe	mod modifica.			Curiday	monday	rucsuay	redicaday	muraday	- maay	Gatarday	Total
xpense Itei	n:										
	1 Breakfast										0.00
2	Lunch										0.00
	Dinner										0.00
	4 Lodging										0.00
	5 Meals and refreshment for others *										0.00
	Air or Rail										
	Taxi & Limousine/car	rental									0.00
	Mileage		Miles								3.30
	reimbursement		Rate	0.400	0.400	0.400	0.400	0.400	0.400	0.400	
			Total	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
9	9 Other transportation/ parking										0.00
10	10 Telephone										0.00
11	Tips									0.00	
12	Other (explain)										0.00
13	Registration										0.00
Detailed Ex	planation of Item 5									Total expense	
Name of F		Name of Po	erson(s)						Amount	Less advance	
										Less paid by P- Card	
										Due King's	
								Total of Line 5	0.00	Due Claimant	
Ge	neral Ledger Accoun	t		Account Name		Amo		. Juli S. Ellio S		ription	
					TOTAL	0.00					
aculty / Staf	f Signature				<u> </u>			I			(date)
ice Presider	nt Signature										(date)
					For Business C	Mino Hea Oak					

Comptroller Approval

VP for Business Affairs Approval _____

