

Area 70 Expense Form

Date Submitted:

Committee Chair or Officer Title: _____

Name: _____

Address (if to be mailed): _____

Mileage Expenses

Event	Date	Round Trip	Amount per Mile	Total Dollars
			X 0.45 cents	
			X 0.45 cents	
			X 0.45 cents	
			X 0.45 cents	
			X 0.45 cents	
			X 0.45 cents	

Other Expenses

Literature (books, pamphlets, meeting lists)	
Supplies (including shipping costs,tax,etc.)	
Copying Costs	
Postage	
Phone Calls	
Other (specify)	
Service Events (meals, hotels, registrations . . .)	
Total Expenses:	<input style="width: 100%; height: 20px;" type="text"/>

Area 70 Treasurer
Area70Treasurer@aavt.org
P.O. Box 1212, Montpelier, VT 05601
 Please have all receipts where applicable.
 Thank You For Your Service!