

Office Use Only

Paid by check # \_\_\_\_\_ Date \_\_\_\_\_

NEW MEXICO CONFERENCE EXPENSE VOUCHER

PAYABLE TO:

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Account # \_\_\_\_\_

Account/Committee Name \_\_\_\_\_

Date(s) of Expense \_\_\_\_\_

Please note: Except for mileage, all requests for reimbursement must be accompanied by original receipts for all expenses occurred.

TRAVEL Auto \_\_\_\_\_ miles @ 34.5¢, 1 person \_\_\_\_\_ 0.00

\_\_\_\_\_ miles @ 39.5¢, 2 or more \_\_\_\_\_ 0.00

Airfare, bus or rental \_\_\_\_\_

Parking, taxi, gasoline, tolls, etc \_\_\_\_\_

MEALS Number of meals \_\_\_\_\_ Total Cost \_\_\_\_\_

Not to exceed \$10.00/meal or a total of \$30/day

LODGING \_\_\_\_\_ day(s) @ \_\_\_\_\_ /day \_\_\_\_\_ 0.00

Maximum reimbursed, Negotiated Conference rate (currently \$89 + 12.35 tax)

OTHER EXPENSES

Honorarium (SSN/EIN) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**TOTAL EXPENSES CLAIMED \_\_\_\_\_ 0.00**

AUTHORIZED BY:

\_\_\_\_\_ Date \_\_\_\_\_

