

TRAVEL EXPENSE REPORT - INTERNATIONAL AND REGION OFFICERS
WALLY BYAM CARAVAN CLUB INTERNATIONAL, INC.
PO Box 612, Jackson Center, OH 45334

Name _____ Title _____ Date _____

Dates	Rallies and Meetings Attended	Mileage

Designate acct. to be charged:

Total mileage _____ x.535 per mile _____

Acct.No.	Amt.
600 Intl.Officer	_____
601 Intl.Bd.Travel	_____
610 Other Bd.Mbr.	_____
611 Other Bd.Travel	_____
620 Reg.Officer	_____
630 Reg.Bd.Travel	_____
Other: _____	_____
TOTAL	\$ _____

Rally Fees	_____
Overnight Parking	_____
Tolls	_____
Other _____	_____
_____	_____
_____	_____
_____	_____
TOTAL	\$ _____

(For office use)

Ck# _____ Date _____

Approval _____ Ext.Ck. _____

Signature _____

Approved by _____

NOTE: All expense claims may be submitted monthly and shall be submitted at least quarterly for payment, except that claims for the final quarter shall be submitted prior to August 1 and International Board of Trustees Meeting travel expense shall be submitted at the end of the month in which incurred. All expense claims will be accompanied by receipts, or their equivalent, to cover all expenses claimed except mileage. (Policy, page 35.2)