


	A	B	C	D	E	F	G	H	I	J	
1	APPA BOARD										
2	EXPENSE REPORT		<i>Name:</i>								
3			<i>Address:</i>								
4			<i>City/State/Zip:</i>								
5			<i>Purpose:</i>								
6			<i>Location:</i>								
7			<i>DATES:</i>		<i>FROM:</i>		<i>TO:</i>				
8			<i>revised 1/2019</i>								
9			EXPENSE ITEMS		MON	TUES	WED	THUR	FRI	SAT	SUN
10	<i>*Please read revised Guidelines</i>		/ /	/ /	/ /	/ /	/ /	/ /	/ /	TOTALS	
11	1. Breakfast		\$	\$	\$	\$	\$	\$	\$	\$	
12	2. Lunch										
13	3. Dinner										
14	4. Lodging										
15	5. Meals & Refreshments for Others										
16	6. Air/Rail										
17	7. Taxi/Limousine/Shuttle										
18	8. Mileage Rate as of 1/2019										
19	.58 x _____ = \$ _____)										
20	9. Other Transportation										
21	10. Other (*explain)										
22	12. Honoraria										
23	(SSN: _____ / _____ / _____)										
24										TOTAL	
25											
26	<i>*Detail Explanation of Item 5</i>		<i>*Explanation by Item Number of Any Unusual Expenses</i>						<i>Less Adv.</i>		
27	<i>(Use Reverse Side if Necessary)</i>		<i>(Other than Item 5)</i>						\$		
28	Date	Name of Person(s)	Amount							<i>Less Paid by APPA</i>	
29										\$	
30										<i>Due APPA</i>	
31										\$	
32										<i>Due Claimant</i>	
33		<i>Total of Line #5</i>								\$	
34	FOR APPA USE ONLY				<i>Signature:</i>						
35	Account Number	Amount	Approval								
36				<i>Make check payable to:</i>							
37				<i>Date Submitted to APPA:</i>							
38											
39	<i>Vendor #:</i>				<i>Reference #:</i>						
40	Return To: Holly Judd @ holly@appa.org / office: (703) 542.3834 / fax: (703) 542-3786										
41											
42	***Please Submit All Travel Receipts										
43	*See reverse side for other instructions										

	A	B	C	D	E	F	G	H	I	J
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55	GUIDELINES & INSTRUCTIONS FOR COMPLETING APPA EXPENSE REPORT									
56										
57		(Lines 1-3)			Enter costs including tips.					
58					<i>Note: Meal per diem allowance is \$65 per day inclusive of all charges including tips. APPA <u>will not</u> cover more than the daily per diem allowance.</i>					
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65		(Line 4)	Meals & Refreshments for others		Enter cost of meals and refreshments for others. <i>You must list names of persons in the block provided at the bottom of the sheet if it is a group meal.</i>					
66					Enter amount of total mileage and multiply by the current APPA mileage reimbursement rate. <i>(Current rate is .58 per mile) as of Jan 1, 2019</i> <i>*For long-distance travel, if you choose to drive instead of flying.</i> If your mileage cost is higher than the cost of a direct flight, coach-class airline ticket, APPA will reimburse the amount equal to the coach-class airfare.					
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71		(Line 8)	Mileage Reimbursement							
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83		(Line 9)	Other Transportation		Enter miscellaneous transportation such as rental cars, parking, tolls, etc. <i>Car rentals need pre-authorization from the APPA office.</i>					
84					Enter miscellaneous expenses with explanation.					
85										
86										
87					If applicable, enter social security number or FEID# in explanation box.					
88		(Line 10)	Other							
89										
90					If applicable, enter social security number or FEID# in explanation box.					
91		(Line 11)	Honoraria							
92										
93										