

DUNELAND TEACHERS ASSOCIATION EXPENSE CLAIM FORM

Today's Date _____ Date when expense incurred _____

Nature of Expense _____

Please itemize expenses: **MAKE PHOTO COPIES and ATTACH ORIGINAL RECEIPTS!**
(For your records)

_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

Mileage: Miles Driven _____ @ _____ \$ _____
(USE CURRENT IRS RATE)
As of 1/1/11 \$0.51
As of 1/1/12: \$0.55 Total \$ _____

Make Check Payable to: (please print) _____

Send Check to: (School, Home or Business Address) _____

Submitted by: _____ Signature _____
Please Print

Make photo copies and Send Originals to:

Rob Yong
Treasurer
Chesterton Middle School
or
6595 Monument Ave
Portage IN 46368

OFFICE USE ONLY	
Check Number	_____
Date	_____
Amount	_____
Account #	_____