DEPARTMENT OF SOUTH CAROLINA

Veterans of Foreign Wars of the United States

(NOTE: Travel at $0.25 cents per mile)

*ALL ENTRIES SHALL BE LEGIBLE AND RECEIPTS ANNOTATED AS TO WHICH ITEMS ARE TO BE REIMBURSED

Expense Account:

Name: _____ Title: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone No._____ Cell No. _____ Email: _____

DATE	FROM	TO	PURPOSE	MILES	AMOUNT

OTHER EXPENSES

LODGING: (Attach Amount: ($000.00) _____

MEALS: (Attach Receipt/s Amount: ($000.00) _____

OTHER: (Explain) Amount: ($000.00) _____

GRAND TOTAL OF ALL EXPENSES SUBMITTED: $ _____

I do hereby certify that the expenses listed above are true and correct as incurred by me for the purpose as designated.

Date:_____ Signature:_____

VFW Department of South Carolina
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Lexington, South Carolina 29072
Phone: 803.808.0317 FAX: :803.808.0417
e-mail: dept@vfwsc.org