CALIFORNIA CUPA FORUM BOARD TRAVEL EXPENSE CLAIM See Instructions and * Privacy Page 1 of 1 Pages													
Sta					nstructions and * Privacy tement on Reverse Side					Page <u>1 of 1</u> Pages			
CLAIMANT'S NAME					SSAN OR EMPLOYEE NUMBER * (not required) Not Required					EMAIL			
TITLE CB/ID NUM			/BER	AGENCY NAME				DEPARTMENT					
RESIDENCE ADDRESS					AGENCY ADDRESS					TELEPHONE NUMBER			
CITY		ZIP CODE	СІТҮ					STATE ZIP CODE			ZIP CODE		
(1) MONTH/YR	(2)	(3)		MEALS	(4) TRANSPORTATIO								
DATE	LOCATION WHERE EXPENSES WERE INCURRED	Lodging (Submit Receipt)	BREAK- FAST (\$10)	LUNCH (\$20)	DINNER (\$30)	NA	(A) Cost of Trans (Submit [:] Receipt	(B) TYPE USED	(C) Shuttle, (Submit Receipt) Tolls		(D) e Car Use required) AMOUNT	Misc. Expenses (Submit Receipt)	TOTAL EXPENSES FOR DAY
SUBT													
SUBTOTALS CLAIM TOTAL													
		, REMAR			Attach rece	eipts/vouch	ners when	require	ed)				
	CUPA Conference 2020												
Who to make check out to: MILEAGE RATE CLAIMED Where to mail the check: 0.575 cents per											ents per mile		
PLEASE MAIL FORM BY 3/31 WITH RECEIPTS TO CAL CUPA FORUM P.O. BOX 2017, CAMERON PARK, CA 95682-2017 530-676-0815 www.calcupa.orgAGENCY ACCOUNTING OFFIC USE ONLY													
(6) I HERE	BY CERTIFY That the	above is a t	rue stateme	nt of the tra	vel expense	s incurred b local ag	•	purpo	se listed al	oove an	d in the serv	vice of of the C	CUPA Forum Board or my
CLAIMANT'S SIGNATURE DATE (7) SIGNATURE OF MANAGER APPROVING TRAVEL AND PAYMER										D PAYMEN	IDATE		
(7.) APPROVAL EXPENSE AUTHORIZATION - SI (See Item 17 on reverse)											DATE		
 If you sp reimbursed You may receipt is n Enter the For type car Enter the Enter the For you dre Reimburse Enter an 	I. No receipt is claim \$30 for ecessary. e costs of your of transportat e cost of any to ove a private of ment will not of	ight at t s neces r dinner r air/tra ion ent olls, sh car, ent occur w us pre-	in/bus f er "R" f uttles, i er the i vithout a	el, you i ach nigh fare. R for railw ridesha miles di a map v	may cla eimburs vay, "B" res, etc riven. T verifying	im \$10 pent at sement for bus . Reim The forr g mileag	for bre the hot will not or othe bursen n will ca ge.	akfa tel. I t occ er pu nent alcul	st on No oth cur with ublic tra will nc ate mi	Monc er di nout ansit t occ leage	lay. No nners v a receij , "A" for cur with e reimb	o other bi vill be rei ot. r airline, out a rec ursemer	"PC" for private

9. The form will calculate all totals.