EXPENSE STATEMENT TO BE USED BY PARTICIPANTS IN imgCIF WORKSHOP, 22 JULY 2006. RETURN THIS SIGNED STATEMENT WITH VERIFIED COPIES OF RECEIPTS TO: Prof. Herbert J. Bernstein, Dowling College, 150 Idle Hour Blvd KSC 121, Oakdale, NY 11769-1999, USA.

DOWLING COLLEGE

Rudolph Campus
150 Idle Hour Blvd.
Oakdale, NY 11769

Brookhaven Campus
1300 William Floyd Pkwy.
Shirley, NY 11967

1.800.DOWLING www.dowling.edu

2006 EXPENSE STATEMENT

TRAVELLER

Name _____ Vendor # _____
Address _____ Event _____
City, State/Province, Postcode, Country _____ Manager Prof. Herbert J. Bernstein

PERIOD

From _____
To _____

Date	Purpose	Description	Meals	Lodging	Airfare	Car Rental	Parking	Mileage	Other	TOTAL

Under penalties of perjury, I declare that I have examined this form and alll attachments thereto & to the best of my knowledge & belief this is a true accounting of expenses for my attendance at the imgCIF Workshop (WK.02) in Honolulu, HI, USA, & that any attached receipts are originals or true and accurate copies thereof. I further declare that I have not & will not claim reimbursement for the same expenses from any other source.
Signed _____ Date _____

Subtotal	
Subtract Advances	
TOTAL	

APPROVED BY

Name _____
Signature _____
Date _____

NOTES

Mileage reimbursement rate: $.445
Meals: SEE OFFER LETTER
effective January 1, 2006.

- ❑ Reimbursement
- ❑ Advance
- ❑ Itemized Expense List ONLY

ACCOUNTING DISTRIBUTION

FUND _____ ORG _____ A/C _____
FUND _____ ORG _____ A/C _____

ACCOUNTING DEPARTMENT USE

DOC #1 _____ DUE DATE _____ BANK _____
BANK _____ DATE ENTERED _____ BY _____