

DOWLING

C O L L E G E

Rudolph Campus 150 Idle Hour Blvd. Oakdale, NY 11769
 Brookhaven Campus 1300 William Floyd Pkwy. Shirley, NY 11967
 Melville Center 145 Pinelawn Rd., Suite 350S Melville, NY 11747

1.800.DOWLING www.dowling.edu

2008 EXPENSE STATEMENT

TRAVELLER _____

Name _____ Vendor # _____

Address _____ Purpose _____

City, State/Province, Postcode, Country _____ Signature _____

PERIOD _____

From _____

To _____

Date	Fund	Org	Acct	Description	Meals	Lodging	Airfare	Car Rental	Parking	No. of Miles	Other	TOTAL

Under penalties of perjury, I declare that I have examined this form and all attachments thereto & to the best of my knowledge & belief this is a true accounting of expenses for my attendance at the Raw Image Formats Workshop at BNL, Upton, NY, & 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 _____

APPROVAL _____

Name _____

Signature _____

Date _____

NOTES _____

Mileage reimbursement rate: \$.505

Meals per diem: \$40.00 per day

effective January 1, 2008.

Reimbursement

Advance

Itemized Expense List ONLY

FINANCE APPROVAL	ACCOUNTING DEPARTMENT USE
JG _____	DOC #I _____ BANK _____ DUE DATE _____
DATE _____	DATE ENTERED _____ BY _____ N S F <input type="checkbox"/> Yes <input type="checkbox"/> No