

First Circuit CASA Program - Travel Expense Voucher

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Name:

Address:

Departure Date: Departure Hour:

Arrival Date: Arrival Hour:

Method of Travel: Plane Car

Nature of Business:

Location To:

From:

EXPENSES

Total Mileage: @ 72.5 cents per mile = \$

Breakfast (max \$16 in-state / \$23 out-of-state) Depart b/w 5:30 - 8:00 am

Lunch (max \$19 in-state / \$26 out-of-state) Depart b/w 11:30 am - 1:00 pm

Dinner (max \$28 in-state / \$38 out-of-state) Depart b/w 5:30 - 8:00 pm

Lodging (receipts must be attached)

Approved expenses (taxi, shuttle, airfare, etc.)

Total amount due: \$

Check payable to:

Mailing Address:

Are you a: Board Member Volunteer Staff Consultant/Other

Signature