

## Inland Lakes Unity Committee

### Expense Statement

\_\_\_\_\_  
 Name Date Position

Request is for: **Reimbursement** \_\_\_\_\_ **Advance/Working Reserve** \_\_\_\_\_

**DO NOT REQUEST REIMBURSEMENT WITHOUT A RECEIPT FOR ALL EXPENSES AND ADVANCES ARE DEDUCTED FROM FUTURE REIMBURSEMENTS!!!!**

<u>Date</u>	<u># of Copies</u>	<u>Mileage</u>	<u>Phone</u>	<u>Postage</u>	<u>Other</u>	<u>Total</u>
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
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_____	_____	_____	_____	_____	_____	_____
<b>Total</b>	_____	_____	_____	_____	_____	_____

Total this report: \_\_\_\_\_  
 Less Advance: \_\_\_\_\_  
 Due to ILUC \_\_\_\_\_  
 Due to individual: \_\_\_\_\_

Explanation of "Mileage": \_\_\_\_\_

Purpose of copies: \_\_\_\_\_

Explanation of "Other": \_\_\_\_\_

Explanation of "Phone": \_\_\_\_\_

Signature: \_\_\_\_\_

Address if check is to be mailed: \_\_\_\_\_

Was information verified? \_\_\_\_\_ ILUC Check # \_\_\_\_\_