

**UNITED PENTECOSTAL CHURCH INTERNATIONAL**  
**PA. DISTRICT U.P.C.I.**  
Expense Reimbursement Statement

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Division: \_\_\_\_\_

Type Of Business Expense: \_\_\_\_\_  
(Board, Committee, Conference, etc)

Place Meeting Held: \_\_\_\_\_

Transportation:

Dates Of Travel: \_\_\_\_\_ To \_\_\_\_\_

Travel From: \_\_\_\_\_ To \_\_\_\_\_

Miles Driven \_\_\_\_\_ Expenses: \$ \_\_\_\_\_

Tolls: \_\_\_\_\_ Expenses: \$ \_\_\_\_\_

Hotel/Motel \_\_\_\_\_ Room Charges: \$ \_\_\_\_\_

Dates: \_\_\_\_\_

Meals: \_\_\_\_\_ \$ \_\_\_\_\_  
(Date/Location)

\_\_\_\_\_ \$ \_\_\_\_\_  
(Date/Location)

Number of days away from home? \_\_\_\_\_

Miscellaneous Items

Telephone: \$ \_\_\_\_\_

Other \_\_\_\_\_ \$ \_\_\_\_\_

Other \_\_\_\_\_ \$ \_\_\_\_\_

Total \$ \_\_\_\_\_

Fill in all applicable blanks. Please submit all supporting expense documents: (receipts for telephone, lodging, meals and miscellaneous.) Explain any unusual expenses on back.

Actual expenses are not to exceed:	Breakfast. \$10.00
Mileage: <u>54.5</u> cents per mile	Lunch \$15.00
Lodging: \$80.00 per day.	Dinner \$20.00