A.P.C.O.

MICHIGAN CHAPTER

Travel Expense Voucher

1. Voucher No.	2. Period Covered
	to
3. Approp. Year	**4. Page of Page**
	/

5. Name and Address	6. Soc. Sec. No.	7. Title or Grade of Membership
	/ /	
	8. Message:	
9. Nature of Business:		

Instructions:

Receipts - Must be attached (Items 16,17,18,19)
Meals - B - Breakfast
- L - Lunch
- D - Dinner

10.	11.	HOURS OF		MILEAGE		16.	MEALS		19.	20.
Day of Month	Travel Description	12. Depart	13. Return	14. Miles	15. Amt.	Hotel Or Motel	17. B, L, D	18. Cost	Other Exp. Explain in Section 8	Daily Total
21. SUMMARY:										
								22. TOTAL:		

I certify that all items of expense included above were incurred in the discharge of authorized APCO official business; and they represent proper charges.

MEMBER/TRAVELER	DATE	APPROVAL SIGNATURE / TITLE	APPROVAL DATE