

Date (Expense incurred)	Destination, Purpose, Description (if claiming mileage you must include your TO and FROM location)		ATTACH RECEIPTS (Itemized Receipts are Required)				
		Miles	Lodging	Meals	Parking	Other	Tot
l	Т	otal Mileage	@ \$0.70 cents	per mile (eff 1	L/1/2025)		
		5	15.	•		GRAND TOTAL	
						_	
	e Signature:			Date:			
	declare under the penalties of perjury that this account, claim or demand is just	and true and that no part of it ho	s been paid.				
Supervisor Signature:				Date:			
		FOR OFFICE US	SF ONLY				
ACCOUNT CODE				AMOUNT			