

PACIFIC NORTHWEST LIBRARY ASSOCIATION EXPENSE CLAIM

Name _____ Date _____

Address _____ Position _____

Activity _____

TRAVEL EXPENSES

Date	Air/Other Fare	Lodging	Breakfast	Lunch	Dinner	Taxi/Pkg	Total
	\$	\$	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$	\$	\$

Date	Mileage (57.5)	Car Rental	Other Travel Expenses (Describe)	Total
	\$	\$	\$	\$
	\$	\$	\$	\$
Total	\$	\$	\$	\$

Total Travel _____

OTHER EXPENSES (Excluding travel)

e.g. postage, telephone, supplies; printing duplicating; professional services, etc.

Date	Goods/Services	Vendor	Amount
			\$
			\$
			\$
			\$
			\$
			\$

Total Other \$ _____

Grand Total \$ _____

I, the undersigned, certify that each claim is a just, due and unpaid obligation against the Pacific Northwest Library Association. I certify that it is a correct claim for expenses incurred and that no prior payment has been received.

Claimant/PNLA Officer Signature _____

Mail to: Annie Alger, PNLA Treasurer, Missoula Public Library, 301 E Main St, Missoula MT 59802

Questions? Tel: 406.721.BOOK (2665); email: aalger@missoula.lib.mt.us

Approved by _____

(If required)

Position _____

Date Paid _____ **Check no.** _____

Amount (if different) _____