# The Education Cooperative
## Expense Report

Purpose: _____ Program Code: _____

Name: _____ Manager: _____

| DATE | Description<br>Acct # | Air/<br>Trans.<br>6260 | Lodging<br>6260 | Mileage<br>6260 | Phone<br>6020 | Meals<br>6050 | Other<br>6260 | TOTAL |
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**Note: Mileage reinbursement for personal car = $0.47/mile** **$0.47**

TOTAL REIMBURSEMENT $ -

*** Don't forget to attach receipts ***

**Employee** **Date**

**Manager/Supervisor Approval** **Date**