

## ArkCDA Professional Expense Voucher

This form and proper documentation must be submitted for reimbursement of expenses in accordance with the ArkCDA Handbook.

Name	Date
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Address

### EXPENSES

<b>Travel</b>	TO	From	
	Reason	Miles (@.555 per mile)	Total Mileage \$

<b>*Lodging</b> (Number of Nights)	Total Lodging \$
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<b>Meals</b> (\$10 ea. Breakfast & Lunch, \$20 ea. Dinner)	Total Meals \$
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<b>*Other</b> (List)	Total Other \$
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**\*Attach Receipts**

<b>HONORARIUM</b> (if applicable) Reason:	Total Honorarium \$
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<b>TOTAL EXPENSES</b>	
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**SIGNATURE OF PERSON INCURRING EXPENSE**

<b>OFFICE USE ONLY</b>	
<b>Check Number</b>	<b>Date Paid</b>