

FEATHER RIVER RAIL SOCIETY REIMBURSEMENT FORM

NAME: Kerry Cochran

ADDRESS: 649 5th Ave

San Bruno, Ca. 94066

DATE: 24-Nov-12

If travel: purpose of trip: _____

****PLEASE ATTACH ORIGINAL RECEIPTS FOR REIMBURSEMENT****

VEHICLE REIMBURSEMENT: **(See Note Below)**
 Actual: _____ OR Standard: _____ MILES X \$0.375 AMOUNT: _____

OTHER: Y N EXPLANATION: _____ AMOUNT: _____

MEALS: Y N		RECEIPTS ATTACHED: Y N		
DATE	BREAKFAST	LUNCH	DINNER	MEAL TOTALS:
TOTAL MEAL EXPENSE:				

EXPENSES:		RECEIPTS ATTACHED: Y N		
DATE	STORE	PURPOSE	CODE TO:	TOTALS:
11/24/2012	FCC	Radio License	Ops Dept.	\$ 60.00
TOTAL EXPENSE:				\$ 60.00

TOTAL REIMBURSEMENT REQUESTED: \$ 60.00

I CERTIFY THE ABOVE IS TRUE AND CORRECT.

CLAIMANT: _____

DATE: 12/4/2012

APPROVED: _____

DATE: _____

**MILEAGE NOT REIMBURSABLE IF CLAIMING GAS PURCHASE