

CRA EXPENSE REPORT

NOTE: Please make ALL writing legible and tape ALL receipts securely to an 8 1/2"x 11" sheet of paper.

Name: _____

Address: _____

City, State, Zip: _____

Travel Details

Location	Reason for Travel				Travel Date	
DATE						TOTAL
Hotel						
Breakfast						
Lunch						
Dinner						
Phone						
Taxi/Subway						
Parking						
Mileage \$.405/mile						
Tips						
Entertainment						
Airfare/Train						
Misc.						
CASH TOTAL						

ENTERTAINMENT/MEAL DETAILS

DATE	BUSINESS PURPOSE

SUBTOTAL _____

AMT REIMBURSED BY CRA _____

NOTES: _____

REIMBURSEE SIGNATURE _____ DATE _____

AUTHORIZING SIGNATURE _____ DATE _____

Remit to: **Ken Hoffman**
Computing Research Association
1100 17th St., NW, Ste 507
Washington, DC 20036