



DEPARTMENT OF SOUTH CAROLINA



Veterans of Foreign Wars of the United States

(NOTE: Travel at \$0.35 cents per mile)

***ALL ENTRIES SHALL BE LEGIBLE AND RECEIPTS ANNOTATED AS TO WHICH ITEMS ARE TO BE REIMBURSED**

Expense Account of: (Name) _____ Title: _____

Address: _____ Phone No. _____ Cell No. _____

DATE	FROM	TO	PURPOSE	MILES	AMOUNT

OTHER EXPENSES

LODGING: (Attach Receipt/s) **Amount: (\$000.00)**

MEALS: (Attach Receipt/s) **Amount: (\$000.00)**

OTHER: (Explain) **Amount: (\$000.00)**

GRAND TOTAL OF ALL EXPENSES SUBMITTED: \$

I do hereby certify that the expenses listed above are true and correct as incurred by me for the purpose as designated.

Date: _____ Signature: _____

VFW Department of South Carolina
210 Glassmaster Road, Lexington, South Carolina 29072
Phone: 803.808.0317 FAX: :803.808.0417
e-mail: admin@vfWSC.org