## Georgia Department of Education Employee Expense Statement

	Reporting Period of	Expense
From		To

Name				ŀ	Headquarters				_					
Place of	Residence	(\$	treet)		(City)		(State)		(Zip)	<del>-</del> (i				
Date	1	Comme	rcial Transpo	ortation		Amount	Date	r	Misc	cellaneous	Travel	Amou	ınt	
Date		Comme	rciai Transpi	rtation		Amount	Date			Jonarioodo	1.440.	7		
			200000000000000000000000000000000000000											
2000						(C. = 7,5.111)(1)					- tracement and the			
			Tot	al Amount		\$ -		l,		Tota	al Amount	\$	_	
								11125879						
Explain	any expenses	that are uni	usual or exce	eed establ	ished limits:			1.	State Use Mil		At .58 Cents/Mile	\$	=	
"I do solemnly swear, under criminal penalty of a felony for false statements subject to punishments by fine of not more than \$1,000 or by  2. Meals 3. Lodging (Attach lodging receipts)													-	
"I do solemniy	swear, under criminal	penalty of a felony	for faise statements	subject to punish	nments by fine of not i	nore than \$1,000	or by	3. 4.	\$	-				
imprisonment	for not less than one no	or more than five ye	ears, that the above	statements are tr	ue and I have incurre	d the described ex		\$						
and the state	mileage in the discharg	e of my official dutie	es for the state."				9	5. Commercial Travel						
											Total Expenses	\$	- 5	
Signature	Aut.				Date	·	······	-			Less Travel Advance or Airline Ticket Advance	Legaritana.		
Approved			Date		Approved	I		Date	)——————————————————————————————————————	•	Airline Ticket			
				_	V			MILION :			Net Reimbursement	\$	-	
Vendor No	ımber	Effective Dat	te	Invoice Nur	nber	Description	Travel Expe	ense						
Fund	Organization	L	Program	!	Project		Voucher Num		Wiiko Hilli iki	1				
	414				0800 E.W. 505 S.T.S			- 00		1				
Accoun	t Description		Acc	ount	Subclass	An	ount							
	Mileage	31/11/11	640	001	302	\$	-		Use this space	ition of items requiring ju	stificatio	on		
	Meals		640	002	302	\$	-							
	Lodging	70700000	The second secon	003	302	\$	-							
	Misc. Travel Exp	pense		004	302	\$	-	]						
	Commercial Tra	insportation		005	302	\$	-	!						
	Travel Advance	- A(\$\infty\) (100 - 100	125	004		\$	_	l						
	Total					\$		I	N meli					

<sup>\*</sup>Do not include tickets purchased by department on travel card account.

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	Amount											Personal Car		(0		Department Car				DOAS Car				Other Type Transportation			rcraft								
Lodging	Location											ď	GA Tag No.	State Use Miles		De	O I.D. No.	Totals Miles			I.D. No.	Totals Miles		Other Ty	State Aircraft		Commercial Aircraft		Other (Specify)						
	Amount													State Use	Mileage	0	0		0	0		0	0	0	0	0	0	0	0	0	0	)	0	ileage.	
Dinner	Location												ď	Less Personal	Mileage	0	0	0	0	0	0	0	0	0	0								Total Amount	If transportation was shared, indicate mode and name of person reporting above mileage.	
ch	Amount												h continuous trip	Ending	Mileage																		•	of person re	
Lunch	Location											ileade	Note: Show departure and arrival date for start and finish of each continuous trip.	Starting	Mileage																			ode and name	
dast	Amonnt											Automobile Mileage	rival date for start		Destination																			ed, indicate me	
Breakfast	Location											Au	departure and an		/isited																			tion was share	e Here
Arrival	Time												Note: Show		Origin - Points Visited																			f transporta	
Departure	Time														Orig	)																			
Date	Mo. Day													Date	Mo.   Day																			Purpose of trip	