## TEXAS CATTLEWOMEN, INC. Submit to: Marsha Shoemaker - P.O. Box 295 - Bellvue, TX 76228

## Expense Report

NAME:			TITLE: BEEF A				BEEF AC	CTIVITY (circle) YES NO					
DATE OF TRIP:	TRIP:    PURPOSE OF TRIP:												
RECEIPT #	DATE	DESCRIPTION	MILEAGE	PERSONAL CAR	AIR FARE	HOTEL	MEALS	ΤΑΧΙ	PARKING	PHONE	OTHER	TOTALS	
			0	-								-	
				-								-	
				-								-	
				-								-	
				-								-	
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TOTALS 0				0 0	0	0	0	C	0 0	0			
Mileage is calculated at the current IRS rate (www.irs.gov for updates) Rate \$0.67 (1/1 to 12/31/24)   Each trip must have a separate expense report with orginal receipts attached. Tape receipts to blank paper and number for speed in processing. Reports should be submitted within 30 days of event for reimbursement. If BEEF ACTIVITY is involved - report must be attached. All originals to be mailed to Treasurer.													
SIGNATURE							email - attach email to report) Date Approved						
	(If approved via email - attach email to report)										Date A	pproved	
					TCW Approval:						Data A	mmanad	
Acct No.: Acct No.: Acct No.: Acct No.:	Amo			Amount: Amount: Amount: Amount:					Date Paid: Check # Total Amount				
MAIL PAYMENT	TO:												
	Name A			Address		City	State		Zip	Telephone			