Expense Reimbursement Voucher

Chesapeake Research 645 Contees Wharf R		21037	Name: 7 Address:					
410-798-1283; Fax: 4	10-798-0816						Check if address is no	
Travel Dates:	Start:			End:				
Locations:	From (City, Sta	ate):		To (C	City, State):			
Purpose:		•						
Mileage:	Mileage between your home and your regular job cannot be included in mileage reimbursements.					x 0.575 =		
Meals (Per Diem):	When using GSA	per diem rates, please include first & last day reductions. Amount:						
	Description:					Amount:		
Other Expenses: (Receipts Required)	Description:					Amount:		
	Description:					Amount:		
	Description:					Amount:		
			TO	TAL (1	mileage + me	als + other):		
Travel Dates:	Start:			End:				
Locations:	From (City, Stat				City, State):			
Purpose:	-				-	•		
Mileage:	Mileage between you included in mileage		and your regular job cannot be sements.			x 0.575 =		
Meals (Per Diem):	When using GSA p	er diem r	n rates, please include first & last day reductions.			Amount:		
Other Expenses: (Receipts Required)	Description:					Amount:		
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Travel Dates:	•		TO		mileage + me			
Travel Dates: Locations:	Start:	ate):	TO	End:		als + other):		
Locations:	•	ate):	TO	End:	mileage + me	als + other):		
	Start: From (City, Sta	your hom	ne and your regular job cannot be	End:		als + other):		
Locations: Purpose:	Start: From (City, Sta	your hom	ne and your regular job cannot be	End: To (C	City, State):	als + other):		
Locations: Purpose: Mileage:	Start: From (City, Sta	your hom	ne and your regular job cannot be arsements.	End: To (C	City, State):	x 0.575 =		
Locations: Purpose: Mileage: Meals (Per Diem):	Start: From (City, Statement of the start) Mileage between a included in mileage when using GSA Description:	your hom	ne and your regular job cannot be arsements.	End: To (C	City, State):	x 0.575 = Amount:		
Locations: Purpose: Mileage:	Start: From (City, State of Mileage between included in mileage when using GSA	your hom	ne and your regular job cannot be arsements.	End: To (C	City, State):	x 0.575 = Amount: Amount:		
Locations: Purpose: Mileage: Meals (Per Diem): Other Expenses:	Start: From (City, State of Mileage between state of Mileage between state of Mileage of	your hom	ne and your regular job cannot be arsements.	End: To (C	City, State):	x 0.575 = Amount: Amount:		
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Locations: Purpose: Mileage: Meals (Per Diem): Other Expenses: (Receipts Required) As of 1/1/2020, milea on the GSA website (http://www.gsa.gov/prequested. Alcoholic	Start: From (City, State of Start: From (City, State of Start: Mileage between state of Start: Mileage between state of Start: Mileage between start of Start: Mileage between start of	your homge reimburger diem per diem arsed at diem) f 518. Plet be rei	TO' 57.5 cents per mile. Per Difference attach receipts for all actach receip	End: To (Control of the control of t	ctions. mileage + me HER TOT es for meal ast day redual items for	x 0.575 = Amount: Amount: Amount: Amount: Amount: Amount: Amount: Amount: als + other): AL: reimbursem actions can be which reim	nent can be found be found here: abursement is	