

Exhibit #1

Exhibit 1

Travel Expense Report

Name		
Purpose of Reimbursement		
Dates covered		
Mileage at end of Month		
Total Reimbursement		
Due		\$0.00

Date Submitted

Authorized by _____

Send with Itemized Receipts Attached to Operations Manage

Authorized by _____

Date	Description of Expense (include location)	Meals	Conference Fees	Transportation (gas, oil changes, airfare, etc)	Lodging	Large Vehicle Expense (Personal Company - per year)	Miscellaneous (Category not listed)	U.S. \$	Receipt Attached
								\$0.00	
								\$0.00	
								\$0.00	
								\$0.00	
								\$0.00	
								\$0.00	
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								\$0.00	
								\$0.00	
								\$0.00	
Totals		0	0	0	0	0		\$0.00	

Travel for the Month (w/ dates):
