



# PITTSBURG EDUCATION ASSOCIATION

est. 1949

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159 East 4th Street Pittsburg, CA 94565

## MEMBER EXPENSE STATEMENT

Name: \_\_\_\_\_  
(please print)

Signature: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City Zip Code

### EXPENSES FOR MATERIALS, SUPPLIES, MISCELLANEOUS

Date of Purchase	Item Purchased	Purpose (Meeting, Event, Etc.)	Amount
<b>Sub-Total</b>			

### EXPENSES FOR TRAVEL/MEETINGS

Date and Location of Meeting: \_\_\_\_\_ Name of Group/Committee Meeting: \_\_\_\_\_

DATE:	Sunday /	Monday /	Tuesday /	Wednesday /	Thursday /	Friday /	Saturday /	Total of each line
Breakfast								
Lunch								
Dinner								
Lodging								
Shuttle								
Airfare								
Auto Mileage (\$)								
Parking								
Portage								
<b>Sub-Total</b>								
# of Miles								

Please scan all receipts and send as attachment with this form. Email form back to  
[president@peateachers.org](mailto:president@peateachers.org)

**Total Due**  
**\$**