

**P**ittsburg **E**ducation **A**ssociation

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**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 |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| ***Sub-Total*** |  |

**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 ($) |  |  |  |  |  |  |  |  |
| Parking |  |  |  |  |  |  |  |  |
| Portage |  |  |  |  |  |  |  |  |
| ***Sub-Total*** |  |  |  |  |  |  |  |  |
| # of Miles |  |  |  |  |  |  |  |  |
| **Please scan all receipts and send as attachment with this form. Email form back to president@peateachers.org** | ***Total Due******$*** |