safe drivers
safe vehicles
secure identities
saving lives!

AAMVA

2018 AAMVA Non-Employee Expense Report

Required by Project Manager	
Grant? (Y/N)	
Active Project? (Y/N)	
Funding Available? (Y/N)	

Week Ending:	Travelers Name:		Payee:		Purpose of Travel (One project per expense report):
	Email Address:		Address:		
	Phone #:		Address 2:		

Expense Detail

Date Expense Incurred	Points of Origin & Destination	Transportation (Air/Rail) & Baggage Fees	Lodging (room & tax)	Travel Phone & Internet	Car Rental	Local/Ground Transportation/ Taxi, Metro, etc.	Gas / Tolls / Parking	Mileage - IRS rate **$0.545**	Meals & Incidental Expenses (Per Diem)	Miscellaneous	TOTAL
								$0.00			$0.00
								$0.00			$0.00
								$0.00			$0.00
								$0.00			$0.00
								$0.00			$0.00
								$0.00			$0.00
								$0.00			$0.00
								$0.00			$0.00
								$0.00			$0.00
								$0.00			$0.00
IRS Mileage Rate	TOTAL	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
$ 0.545	EXPENSE CODE	**5361**	**5362**	**5369**	**5363**	**5366**	**5368**	**5364**	**5365**	Provide Details Below	

Project #		Task#	
Miscellaneous Expense Details:			

I certify that this reimbursement request is prepared in accordance with AAMVA's T&E Policy.

Traveler/Requestor (Print name)	Signature	Date
Project Manager Approval (Print name)	**Signature**	**Date**