MILLENNIUM TRAVEL EXPENSE VOUCHER

CONTROL #: _____

NAME: _____ **PIN:** _____

TITLE: _____ **DATE:** _____

Date L	ocation	Work Order	Transport*	Hotel	Other	Entertain	Meals	Total	Explain Other, Entertain, Meals
EXPENSE TOTAL									
LESS: CASH ADVANCE									**LEGEND** * Include vehicle from Side 2 (if applicable) ** Enter on Side 2 *** Distribute on Side 2
BALANCE CLAIMED OR RETURNED									

APPROVAL OF EXPENSES

CERTIFICATION OF EXPENSES
I certify that I have incurred these expenses.

AUDIT

Payment Approved by

Title

Employee's Signature | Date | Checked by | Date | Date

Form 12-E

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