

PAINESVILLE RAILROAD MUSEUM EXPENSE FORM

Painesville Railroad Museum
475 Railroad Street, Painesville, Ohio 44077

Member Name: _____

Date Of Expense: _____

Expense Explanation: _____

EXPENSES

Telephone: \$ _____

Miles Traveled: _____ x \$0.575 = \$ _____
(for Division Business only)

Other Expenses (explain): _____ \$ _____

_____ \$ _____

_____ \$ _____

Reimbursement Total: \$ _____

Check Payable to if different from Member _____

Officer

Approval: _____

For Clerk's Use Only:

Date Paid: _____

Check Number: _____