## **Archdiocese of Louisville**

Mileage and Meal Expense Report July 1, 2024 - June 30, 2025

Name:		Agency:		Date:	
Date	Travel To:	Travel From:	# of Miles	Meals*	Purpose
		Total Number of Miles	0		
		Rate Per Mile	\$0.670		
	Amou	unt to be Reimbursed for Miles	-		
	Amoun	t to be Reimbursed for Meals*	-		
		Grand Total	-	*Receipts for m	eals should indicate who attended and purpose
				only and do not	include items of a personal nature.
Signature:			Approval:		- Darisana d
Address: _		Charge to Dept. #:			Reviewed:
			Account #:	8210	Date:

\*Contact Deborah Herbert if you would like an excel version of this file.