PENNYSLVANIA STATE COUNCIL OF LIONS CLUBS
STATE CONVENTION EXPENSES

NAME_____**DISTRICT 14**_____

ADDRESS_____

ATTENDING AS_____**AT**_____

Wednesday	**Lunch**	**$**_____	
	Dinner	**$**_____	**$**_____
	Hotel		**$**_____
Thursday	**Breakfast**	**$**_____	
	Lunch	**$**_____	
	Dinner	**$**_____	**$**_____
	Hotel		**$**_____
Friday	**Breakfast**	**$**_____	
	Lunch	**$**_____	
	Dinner	**$**_____	**$**_____
	Hotel		**$**_____
Saturday	**Breakfast**	**$**_____	
	Lunch	**$**_____	
	Dinner	**$**_____	**$**_____
	Hotel		**$**_____

CAR MILEAGE_____**MILES AT $0.41 PER MILE** **$**_____

MISCELLANEOUS EXPENSES ***(receipts required)*** **$**_____

TOTAL **$**_____

DATE_____**SIGNED**_____

ANYONE NOT COMPLYING WITH THE ABOVE WILL NOT RECEIVE PAYMENT