



# American Legion, Department of Alabama Travel and Expense Report

14. Adjutant Approval

Approved  
 Disapproved

Make check payable to:

1. Name

2. Dept,  
District, Post

First Name	Middle Initial	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

3. Address

City, State, Zip

4. Submitted by

(Office Title related to the expense report)

5. Office Title

9. Per Mile Reimbursement

Department \$.30 per mile

6. Date Submitted

10a. Total Reimbursement Req

7. Approved by

8. Date Approved

10b. Total Reimbursement Due

11

Date	Description of Expense (Include Accounting Code Here)	Airfare	Lodging	Ground Transportation (Gas, Rental Car, Taxi)	Meals & Tips	Conferences and Seminars	Miles	Mileage Reimbursement	Miscellaneous	Miscellaneous Explanation	Total

12. Signature

Date

13. Approval Signature

Date

## **INSTRUCTIONS FOR GENERAL EXPENSE REPORT**

*PRINT ALL INFORMATION ON THE FORM EXCEPT SIGNATURES*

### **BLOCKS**

### **INSTRUCTIONS**

- 1 The name area is for whom the check is to be written
- 2 The section that the individual is representing i.e. Department, District, or Post
- 3 Address the check is to be mailed to
- 4 The name of the person submitting the report
- 5 Office title of the individual seeking reimbursement (related to the expense)
- 6 Date Submitted
- 7 Name of individual who approved the travel
- 8 Date(s) the travel was approved
- 9 Per mile reimbursement (if left blank Department rate of \$0.30 will be applied)
- 10a Total reimbursement requested (completed by person submitting report)
- 10b Total reimbursement due (completed by the accountant)
- 11 Detail break down of expenses and receipts listed in chronological order
- 12 Signature of person submitting reimbursement report
- 13 Signature of the approving authority for expenditure
- 14 Adjutant's approval, initials after review

### ***Notes***

- \*\*\* If you request mileage do not enclose fuel receipts
- \*\*\* Claims for meals, supplies, dinners, luncheons, hotels, training, conferences, seminars, must have an attached receipt
- \*\*\* Non-Receipt items like tips, bellhops, no receipt available, may be listed and will be paid upon approval of the Department Adjutant
- \*\*\* These forms can be sent from Department HQs via email, USPS, or copied at the post level
- \*\*\* If you have any questions when completing your expense report, please do not hesitate to call or email the Department (334) 262-6638 or email [angela.nation@legional.org](mailto:angela.nation@legional.org)



**American Legion  
 Department of Alabama  
 District  
 Travel and Expense Report**

12. Adjutant Approval

<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved
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*Make check payable to:*

1. Name   
FIRST NAME    MIDDLE INITIAL    LAST NAME

2. Address

City, State, Zip

3. Office Title (Position Held)

4. Date Submitted

5. Date Approved

6. Cents Per Mile Reimbursement :

7. Total Reimbursement Requested

8. Total Reimbursement Due

9 District #	Date	Line Item Code	Available Budget	Amount Requested	Remaining Budget	Reason for Request

10 \_\_\_\_\_  
*Signature* *Date*

11 \_\_\_\_\_  
*Approval Signature* *Date*

# **INSTRUCTIONS FOR DISTRICT EXPENSE REPORT**

*PRINT ALL INFORMATION ON THE FORM EXCEPT SIGNATURES*

## **BLOCKS**

## **INSTRUCTIONS**

- 1 The name area is for whom the check is to be written
- 2 Address the check is to be mailed to
- 3 Office title of the individual seeking reimbursement (related to the expense)
- 4 Date Submitted
- 5 Date(s) the travel was approved
- 6 Per mile reimbursement (if left blank Department rate of \$0.30 will be applied)
- 7 Total reimbursement requested (completed by person submitting report)
- 8 Total reimbursement due (completed by the accountant)
- 9 Detail break down of expenses and receipts listed in chronological order
- 10 Signature of person submitting reimbursement report
- 11 Signature of the approving authority for expenditure
- 12 Adjutant's approval, initials after review

## **Notes**

- \*\*\* If you request mileage do not enclose fuel receipts
- \*\*\* Claims for meals, supplies, dinners, luncheons, hotels, training, conferences, seminars, must have an attached receipt
- \*\*\* Non-Receipt items like tips, bellhops, no receipt available, may be listed and will be paid upon approval of the Department Adjutant
- \*\*\* Districts can use the District or General Expense Report
- \*\*\* Account codes can be found on the included spread sheet
- \*\*\* These forms can be sent from Department HQs via email, USPS, or copied at the post level
- \*\*\* If you have any questions when completing your expense report, please do not hesitate to call or email the Department (334) 262-6638 or email [angela.nation@legional.org](mailto:angela.nation@legional.org)