



**GOODWILL INDUSTRIES OF NORTHEASTERN PA
925 PROSPECT AVENUE, SCRANTON, PA 18505**

Local Travel Expense Statement

EMPLOYEE: _____ Position: _____ Travel Period: _____ to _____

Program: _____ Personal Auto (make, model & year): _____ License: _____

DATE	PURPOSE OF TRAVEL	PROGRAM	LOCATION		TOTAL MILES
			FROM	TO	

TOTAL MILES: _____
(Including from reverse side)

OTHER EXPENSES

DATE	DESCRIPTION	AMOUNT

TOTAL EXPENSES: \$ _____

*This travel voucher is accurate and complete. The travel and expenses were necessary to the performance of my duties with the Agency.
I understand that false information on this travel voucher is reason for immediate dismissal.*

EMPLOYEE: _____ DATE: _____ SUPERVISOR: _____ DATE: _____

PROGRAM DIRECTOR: _____ DATE: _____

*****FOR FINANCIAL DEPARTMENT ONLY*****

Total Miles: _____ X Rate: _____ = \$ _____ + Expenses \$ _____ = \$ _____

