



National Headquarters Activity Expense Report

Name: _____ Telephone # _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Div/Reg/Bn/Unit: _____

Activity: _____ Location: _____

Dates: Depart: _____ Return: _____

Position Held at Activity: _____

Expenses	Amount
A. Lodging (Not to Exceed \$120.00 per night)	
B. Meals (Not to Exceed \$50.00 per day)	
C. Air Transportation (Economy)	
D. Ground Transportation (Total Miles X \$0.54 = Amount)	
Odometer: Start Finish Total Miles	
E. Other	
Total Expenses	
All Expenses, except Mileage, must be supported with receipts.	
All receipts must be submitted with the Expense Report.	

I, _____, certify that all the expenses above were incurred while on official Young Marines' business, the information provided above is correct and I have not received reimbursement from any other source for these expenses. I further certify that I am not personally profiting in any way from this request.

Claimant's Signature: _____ Date: _____

Mail completed Expense Report with receipts to:

Young Marines National Headquarters
17739 Main Street, Suite 250
Dumfries, VA 22026

All Expense Reports must be submitted within 30 days of the ending date of the attended function. Expense Reports received beyond 30 days will be denied.