International Police Association - US Section

Expense Report

Report Date

Name	
Address	
City, State, Zip	

Date	Description/Purpose	Postage	Phone	Office Etc.	Other	Amount
						$0.00
						$0.00
						$0.00
						$0.00
						$0.00
						$0.00
						$0.00
						$0.00
						$0.00
						$0.00
	Category Totals	$0.00	$0.00	$0.00	$0.00	

Total Due **$0.00**

Date	NEC/NDC Expense	
	Transportation	
	Lodging	
	Other (Explain in comments)	

Note: Receipts must be provided for reimbursement.

Comments if needed

Click to clear $ only blocks **Click to clear entire form**

Requestor's Signature **Date**

Approved by **Date**

Paid by **Check #**

Kevin Gordon, US Treasurer

FORM IPA-04_Electronic Version