LOS ANGELES COMMUNITY COLLEGE DISTRICT

RECEIPT FOR MEAL EXPENSES - STUDENT TRAVEL

COLLEGE _____ **CHECK #** _____

DATE _____ **ADVANCE AMOUNT** _____

ACTIVITY _____

LOCATION _____

EXPENSE:	Qty	$	$
Trasportation			
Lunch			
Dinner			
Snack			

TOTAL	0.00
LESS ADVANCE	0.00
AMOUNT RETURNED	0.00

	NAME	SIGNATURE
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