

Idaho Area Expense Form for Assembly Hosting Districts

REQUIRED INFORMATION

DISTRICT #	EVENT:		
DR NAME:			
ADDRESS:			
CITY:	STATE:	ZIP:	
PHONE #	E-MAIL:		

EXPENSES

(PLEASE PROVIDE COPIES OF RECEIPTS FOR TRAVEL, HOTEL ROOM, MEALS)

	SPEAKER TRAVEL EXPENSES	AMOUNT
	EVENT REGISTRATION	\$ 1.00
	EVENT MEALS	\$ -
	OTHER MEALS	\$ -
	GAS/UBER TO VENUE	\$ -
	HOTEL ROOM	\$ -
	AIRFARE	\$ -
	ASSEMBLY EXPENSES	
	COPIES: (AGENDAS, OTHER)	\$ -
	SPEAKER THANK YOU GIFT	\$ -
	BADGES	\$ -
	OTHER	\$ -
	OTHER	\$ -
	OTHER	\$ -
	OTHER	\$ -
	TOTAL	\$ 1.00

INSTRUCTIONS

Mail to:	Idaho Area Treasurer	
	PO Box 4521	
	Pocatello, ID 83205-4521	
Email To:	afgarea13treasurer@gmail.com	

FOR USE BY TREASURER

DATE PAID:	CHECK #
Notes:	