

Send this form and receipts to: Lobos M/C, P.O. Box 2631, Clackamas, OR 97015

Event Name:	Date:	Totals
Your Name: Your Address:		
Event Assignment:		
Ending Odometer Reading		
Beginning Odometer Reading		
Total Mileage	0	
Start with full tank - initial fill up before departure is not reimbursed		
Fuel:		
Fuel:		
Fuel:		
Fuel:		
Total Fuel:		0
Hotel expense in lieu of per diem		
Hotel:		Room rate & taxes
Hotel:		
Hotel:		
Hotel:		
Hotel Total:		0
Per diem in lieu of Hotel \$30 per person \$60 per campsite		
Per diem:		
Per diem:		
Per diem:		
Per diem:		
Per diem Total:		0
Description		
Misc Expense:		
Misc Expense:		
Misc Expense:		
Misc Total:		0
Total Due:		0