



LAOTIAN COMMUNITY CENTER OF RI, INC

TRAVEL EXPENSES LOG FORM

LCC Travel Advance Request

Date Submitted			
Traveler Name	Laotian Community Center of RI, Inc		
Traveler Address	88 Limerock Road Smithfield, RI 02917		
E-mail Alias	kpathana@lccri.org		
Phone	978-606-9194		
Department	Art , Culture, Education, Media & Music		
Destination			
Departure Date			
Return Date			
Purpose of Travel			
Total Advance Requested			
Approved By			
Approval Signature		Date Approved	
Traveler Signature		Date Signed	

Anticipated Expenses

Type of Expense	Description of Expense	Daily Expenses (Except Airfare)	# of Days	Total Expenses
Ground Transportation				
Gas/ Tolls				
Meals and Tips				
Lodging				
Cultural Performing Incentive				
Misc. Preparation				
		Grand Total		