

This form will be used by all members of the Department Executive Committee to request travel payment for OFFICIAL LEGION BUSINESS. Complete all sections of this form in detail and email mail to: finance-accounting@georgialegion.org or mail to:

The American Legion
Department of Georgia
3035 Mt. Zion Rd.
Stockbridge, GA 30281-4101

*This form should be filed for travel during the immediate preceding month; include the date(s) of departure, place(s) visited, total number of miles traveled and **the nature of business** for which travel payment is requested. Please supply lodging receipts if payment is being requested on lodging.

*** Ensure the Commander or Adjutant signs via initials in the respective column and row, as needed.**

*Payment will be made to the Department Executive Committee members at the rate of **\$0.35 per mile traveled**

Remitted by:

Remit Address:

DATE	ORIGIN	DESTINATION	POST	TYPE	MILES	REASON

Total miles				
\$	0.35	Mileage	\$	-
		Hotel		
		Other		
		TOTAL	\$	-

Above information certified to be correct.

Signature of person filling out this travel statement: _____

Adjutant or Treasurer signature (if applicable): _____

Submitted date: _____