## NBER

Conference Department 1050 Massachusetts Avenue Cambridge, MA 02138

## NATIONAL BUREAU OF ECONOMIC RESEARCH, INC. TRAVEL EXPENSE REPORT (Complete all but shaded areas)

PAYEE NUMBER						CHECK DATE			
PAYEE NAME									
ADDRESS									
ADDRESS									
CITY, STATE, ZIP									
CHARGE THE FOLLOWING ACCOU	NTS:	Project/Gr	ant/Conf	Number			Object		
Conference name		Project xxxxx .	Yr xx	Sub . xx .	Addl xx	-	Code xxxx	-	Amount
		·		··					
		·		··		·			
				··		·			
				· :				•	
TOTAL AMOUNT OF CHECK							:		
DATES									SUB-TOTALS
Description (Itinerary)									
Air and Rail Fare									
Automobile									
Local Travel									
Meals									
Lodging									
Other Expenses									
LESS: NBER Credit Card Items \$									
Travel Advance Other (specify)						\$_ \$		\$	
Micropurcha	se								
Balance Due Traveler								\$	
Balance Due NBER (attach check) PURPOSE OF TRIP/EXPLANATION								\$ Depa	arture Date
									ırn Date
PERSON REQUESTING CHECK In signing this I certify that these expenses are not being reimbursed by any other organization.								DATE	
APPROVAL SIGNATURE								DATE	