

SENATE EXPENSE STATEMENT

THE MINISTERS COUNCIL

P.O. Box 851, Valley Forge, PA 19482-0851
 1-800-ABC-3USA, extension 2333 or 2334 FAX 610/768-2066
 E-mail addresses joe.kutter@abc-usa.org or sue.sechrist@abc-usa.org

NAME OF SENATOR _____

Constituent Council _____

GREEN LAKE CHARGES (Direct Billed to Ministers Council)

Lodging Single Room	\$ _____	
Double Room	\$ _____	
Meals	\$ _____	
Ground Transportation	\$ _____	
TOTAL GREEN LAKE CHARGES		\$ _____

TRAVEL

Plane (Direct Billed to Ministers Council)	\$ _____	
Auto (55.5 cents per mile)		\$ _____
Other	\$ _____	
TOTAL TRAVEL EXPENSES		\$ _____

TOTAL SENATE EXPENSES \$ _____

TOTAL EXPENSES \$ _____

National Ministers Council Share at _____%	\$ _____	Constituent Council Share	\$ _____
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Total Green Lake Charges
 (paid by Ministers Council) \$ _____

Total Airfare Charges
 (paid by Ministers Council) \$ _____

NET AMOUNT \$ _____ *

Please attach receipts

**If positive, this amount is due to the Senator. If negative, this amount is due to the national Ministers Council by the constituent Council or the Senator.*