

COLORADO WATER RESOURCES AND POWER DEVELOPMENT AUTHORITY

1580 LOGAN STREET, SUITE 620, DENVER, COLORADO 80203-1942
 PHONE: (303) 830-1550 FAX: (303) 832-8205
TRAVEL AND EXPENSE REPORT

NAME _____ DATE: FROM _____ TO _____

DATE																
PROGRAMS <small>W=WPCRF; D=DWRF; S=SWRP A=AUTHORITY; O=OTHER</small>	W	D	S	A	O	W	D	S	A	O	W	D	S	A	O	TOTAL
MEALS																
LODGING																
TAXI/SHUTTLE																
TELEPHONE																
PLANE, BUS OR TRAIN FARE																
PARKING AND STORAGE																
MISCELLANEOUS																
MILEAGE FROM BACK OF PAGE																
TOTAL																

I hereby certify that I discharged official duties as a member of the Colorado Water Resources and Power Development Authority on the dates listed and, therefore, request reimbursement for the above traveling and other necessary expenses.

Signature _____

Approved _____

Checked By _____

FOR OFFICE USE ONLY	
VENDOR #:	INVOICE #:
ACCOUNT	AMOUNT
CHECK #:	DATE PAID:

MILEAGE REPORT

DATE	FROM	TO	PURPOSE	TOTAL MILES	PROGRAM	\$ AMOUNT*
					W D S A O	
					W D S A O	
					W D S A O	
					W D S A O	
					W D S A O	
					W D S A O	
					W D S A O	
					W D S A O	
					W D S A O	
					W D S A O	
					W D S A O	
TOTAL						

* As of January 1, 2017, IRS rate is 53.5 cents per mile.