

**MID-AMERICA PETS EXPENSE REIMBURSEMENT REQUEST**

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

<b>Date</b>	<b>Description</b>	<b>Miles @ 0.2875 for 2020</b>	<b>Amount</b>
_____	_____	_____	\$ _____.
_____	_____	_____	\$ _____.
_____	_____	_____	\$ _____.
_____	_____	_____	\$ _____.
_____	_____	_____	\$ _____.
_____	_____	_____	\$ _____.

Please keep a copy for your records. **Total** \$ \_\_\_\_\_.

Send to:  
Carlton E. Davis, Treasurer  
413 N. Bradley  
Warren, AR 71671  
Fax: 870-226-6261

(c) 870-820-2822  
cedavis@warrenbanktrust.com

Approval: \_\_\_\_\_

Check # \_\_\_\_\_ Date: \_\_\_\_\_ Type of Expense: \_\_\_\_\_