



ARPAC
11224 Executive Center Drive
Little Rock, AR 72211

2009
Expense

Name:	
Position:	
Firm Name	
Mailing Address:	
City, State, Zip:	
Date of Request:	

Date	Description	Amount	Appropriation <i>(ARA Use Only)</i>
	January 1, 2009 thru December 31, 2009—.55 per mile		
TOTAL:			

This expense report must be signed and completed with all receipts attached before it can be processed.

Signature	
	Date:

ARA Use Only:
Approved by: _____ Date: _____
Check Number: _____ Check Amount: _____ Check Date: _____
Appropriation: _____