Statement of Expenses for PANTS XIII

Name:	
Address:	
Phone #:	Social Security Number:
Fax #:	Email address:
Faculty without external	unding: Faculty with external funding: Grad Student: Undergrad:_
U.S. Citizen or Permaner	Resident? Yes: No:
As a participant of PANT	S XIII, I incurred and claim for reimbursement of the following expenses:
Signature of Visitor:	Date:
Return form and receip	s to:
	Matthew Boylan

Mathematics Dept.
University of South Carolina 1523 Greene St. Columbia, SC 29208

Description	Amount
Lodging (Original Receipt)	
Air Travel for invited speaker	
Rail/Bus	
Auto mileage miles @ \$0.465/mile	
TOTAL	