

MCA EXPENSE STATEMENT

9.2

NAME: Hasmukh C. Shah

DATE(s): April 13-15, 1980

FOR: Site visit to: Bio/Test Labs

PLACE(s): Northbrook, Illinois

Transportation: state mode of travel (vouchers attached)

American #637
Washington/Chicago, roundtrip

National Car Rental

Hotels: name & city (vouchers attached)

Holiday Inn
Highland Park, Illinois

Meals: (including meal tips)

Taxis: (detail on reverse side)

Entertainment: (detail on reverse side)

Other: (detail on reverse side)

Charged (To be paid direct by MCA)	For Reimbursement
\$ 224.00	\$ _____
	<u>81.56</u>
	<u>\$71.28</u>
	<u>\$16.00</u>
	<u>44.31</u>
	<u>13.50</u>

Unused transportation tickets for refund herewith (list):

Charge all to VC phase ~~III~~ II

TOTAL \$ 226.65

LESS ADVANCES _____

BALANCE \$ 226.65

I hereby certify that the above expenses were necessary and proper in the conduct of business for Manufacturing Chemists Association

Signed:

CMA 013475

H. C. Shah

Authorized by

G. V. Cox

Manager of Staff Services

Approved (over \$250)

(Officer)

Approved (\$1,000)

(Officer)

Check signed by:

&

Revised 2/78

THIS SPACE FOR ACCOUNTING OFFICE USE

Memo Account		ACCOUNT NUMBER	✓	LEDGER DESCRIPTION	AMOUNT
Number	Amount				
\$					\$

MCA EXPENSE STATEMENT

NAME: J.T. Sezwell

DATE(s): 4/13-15/1980

Post
4-17-80
DB

FOR: Continuation of Audit of Vinyl Chloride
Chronic Inhalation Study, Industrial
BIO-TEST Laboratories, Northbrook, Illinois

PLACE(s): Northbrook, Illinois

Transportation: state mode of travel (vouchers attached)

Charged (To be paid direct by MCA)	For Reimbursement
\$ 224.00	\$

Hotels: name & city (vouchers attached)

71.28

Meals: (including meal tips)

8.70

Taxis: (detail on reverse side)

28.15

Entertainment: (detail on reverse side)

Other: (detail on reverse side)

1.90

Unused transportation tickets for refund herewith (list):

Charge total to Vinyl Chloride
Phase VII

TOTAL \$ 118.03

LESS ADVANCES

BALANCE \$ 118.03

THIS SPACE FOR ACCOUNTING OFFICE USE

Memo Account		ACCOUNT NUMBER	✓	LEDGER DESCRIPTION	AMOUNT
Number	Amount				
	\$				\$

I hereby certify that the above expenses were necessary and proper in the conduct of business for Manufacturers Chemists Association

Signed: 

Authorized by CMA 013476

Manager of Staff Services

Approved (over \$250)

(Office
Approved (\$1,000)

(Office
Check signed by:

&
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