

**EXPENSE CLAIM**  
**DEPUTY GRAND CUSTODIANS**

**LODGES**

Date	Lodge Name and Number	Location	School	Examination

**INDIVIDUAL EXAMINATIONS**

Date	Lodge Name and Number	Location	Number of Individuals	Examination

**EXTRA EXPENSE – Explain Here**

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**MILEAGE EXPENSE @ .40 per mile**

Date	Lodge Name and Number	Location	Miles	Amount

\_\_\_\_\_  
Approved – Grand Custodian

\_\_\_\_\_  
Approved – Grand Master

Total Amount of Claim \$ \_\_\_\_\_

Signed \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_  
City State Zip