



**EXPENSE VOUCHER** \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

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

- | Expense category #  |
|---------------------|
| 1. Printing         |
| 2. Electronic Media |
| 2. Event Fees       |
| 3. Office Supplies  |
| 4. Misc. Expenses   |
| 5. Signage/Banners  |
| 6. Postage          |
| 7. Other (specify)  |
| _____               |

***Prior board approval for expenses to be reimbursed is required.***

Date Incurred	Item	Purpose	Vendor	Amount	Expense Cat. #

**(ATTACH ALL RECEIPTS TO VOUCHER)**

**TOTAL** \_\_\_\_\_

YES  NO Do you wish to donate all or part of this reimbursement as a non tax-deductible in-kind contribution to your local League?

**If yes, mark the item(s) in the list that you would like to contribute.**

NOTE: If you wish to contribute **just a portion** of one of the items, you will need to make *two entries for that item*  
 a. one with the amount you want to contribute (mark that entry as above)  
 b. the second entry with the remaining portion for reimbursement.

Signature of Requester \_\_\_\_\_ Date \_\_\_\_\_

**(For Treasurer's Use: Amount Reimbursed \_\_\_\_\_ Date Paid \_\_\_\_\_ Check # \_\_\_\_\_)**