



Expense Voucher Report

Revised March 5, 2020

v004

Check Payable (or transfer funds) to: _____ Report Date: _____

Purpose/Comments: _____

Itemized Expenses		
Merchant/Detail	Invoice or Receipt Attached?	Transaction Amount
	Yes / No	\$
	Yes / No	\$
	Yes / No	\$
	Yes / No	\$
	Yes / No	\$
	Yes / No	\$
	Yes / No	\$
Personal Vehicle Usage	Total Miles _____ @ 56 cents per mile = NOTE: Pre-approval by the Sr. Warden required for reimbursement of personal vehicle usage	\$
Total Voucher Amount		\$

NOTE: Check must be picked up in Church Office unless one of the boxes is checked below:

- Mail payment to the address on invoice attached
- Mail payment to payee listed above at following address:

ADDRESS: _____

CITY, STATE, ZIP _____

APPROVAL BY GUILD, ORGANIZATION, or PARISH OFFICERS

Name of Organization _____

Signatures from 2 officers required

Officer's Signature/Title _____ Date _____

Officer's (or Sr. Warden's) Signature/Title _____ Date _____

Authorization Signature _____

All Saints and Ascension Treasurer or Assistant Treasurer

Authorized Amount Paid \$ _____