Expense Voucher

District 8 Toastmasters

Year 2016-2017

Name: _____

Address: _____

City/State/Zip: _____

Title: _____

For Expenses incurred: _____ to _____

Special Instructions: _____

Please submit the completed voucher AND receipts via mail. email or in person to District Director Lora Mather for approval. She will forward all documents to the District Finance Manager for fnal approval. Note: You can also use the Concur Expense Reporting System and receive payments electronically. Contact the District Finanance Manager for more info.

Please refer to the District 8 Procedures Manual for guidance and reimbursable expenses or contact Tom Coscia, 647A Sugar Trail Court, St. Peters, MO 63376, FM@dist8tm.org. (314) 780-3021.

1. Mileage is reimbursable at $0.54 cents per mile.
2. Long Distance phone calls are reimbursable up to $4.00 per call.
3. Expense voucher to be submitted within 60 days of expense.

Note: **Receipts** must accompany this Expense Voucher for all expenses except mileage.

For Finance Mgr Use Only	Payee or City To/From (Mileage)	Description/Purpose of Expense	Receipt (Y/N)	Date Incurred MM/DD/YYYY	Amount
			☐		$
			☐		$
			☐		$
			☐		$
			☐		$
			☐		$
			☐		$
			☐		$
			☐		$
			☐		$
				Total:	$ **0.00**

Requester: _____ _____ Date: _____
PRINT NAME SIGNATURE

District Officer: _____ _____ Date: _____
PRINT NAME SIGNATURE

Finance Manager: _____ Date: _____
SIGNATURE

Amount Paid: _____ Check #: _____ Date: _____