

Expense Voucher

District 8 Toastmasters

Year 2017-2018

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 Kat Mokriakow for approval. She will forward all documents to the District Finance Manager for final approval. Note: If you are set-up, you will use the Concur Expense Reporting System and receive payments electronically. Contact the District Finance Manager for more info. Please refer to the District 8 Procedures Manual for guidance and reimbursable expenses or contact Tim Spezia, 5037 Re{noua Drive, St. Louis MO 63128, FM@dist8tm.org. (314) : ; 6/6748

1. Mileage is reimbursable at \$0.32 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 or electronic maps must accompany this voucher for all expenses ~~per~~ 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:					\$

Requester: _____ PRINT NAME _____ SIGNATURE Date: _____

District Officer: _____ PRINT NAME _____ SIGNATURE Date: _____

Finance Manager: _____ SIGNATURE Date: _____

Amount Paid: _____ Check #: _____ Date: _____