



Expense Voucher / Request for Reimbursement

The following information must be completed to assure proper accountability of funds.

A separate sheet must be completed for each invoice or payee and include a brief description and any other appropriate/necessary information.

Vendor/company name must be included in the expense description, if the payment/reimbursement is to be made to a payee other than that listed on accompanying invoice/receipt.

Check Date: _____ Check Number: _____

Payable to: _____

Mailing Address: _____

Expense Classification:

Show Expense Membership
 Coronation Anniversary Fund
 Donation Reign Expense
 Other _____

Expense Description	Amount
TOTAL	

Submitted by: _____

Date: _____

Completed by: _____

Date: _____