

## EXPENSE VOUCHER

Committee members should submit all expenses through their committee chair. Please include receipts. If you are a committee chair keep one copy of this form for your own files and send one copy as directed below:

A. Within your budget submit directly to the ASCLS-Minnesota treasurer:

Vickie Larson  
 ASCLS-Minnesota Treasurer  
 808 74th Avenue North  
 Brooklyn Park MN 55444  
 763-566-2048

B. In excess of your committee's budget or for items not included in the budget – the signature of one of the meeting co-chairs is required.

ITEM	DATE	AMOUNT
Postage		
Duplicating		
Refreshments		
Other (specify)		
Other (specify)		
Other (specify)		
Other (specify)		
<b>TOTAL</b>		<b>AMOUNT</b>

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
 \_\_\_\_\_

Committee: \_\_\_\_\_

Meeting co-chair's signature (if required) \_\_\_\_\_

Date Submitted: \_\_\_\_\_

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 (For ASCLS-Minnesota Treasurer's use only)

Date Paid: \_\_\_\_\_

Check # \_\_\_\_\_