

Soroptimist International of Loomis Basin

Expense Voucher

Make check payable to:

Name: _____

Address: _____

Detailed Information/Reason for Payment:

Event/Activity Date: _____

Event/Activity: _____

Additional Info: _____

(conference, dues, reimbursement, etc.)

******Attach Receipts/Invoices/Travel Voucher******

Fund: (Circle One) General Delegate Service In Kind **Amount:** \$ _____

Budgeted Expense:

Amount Budgeted: \$ _____

Or

Board/Club Approval:

Date: _____ Amount Approved: \$ _____



Prepared By: _____ Date: _____
(Signature/Member)

Submitted By: _____ Date: _____
(Signature/Committee Chair)



Treasurer's Use Only

Check Number:

Date:

Amount: