Expense Voucher Presbytery of East Iowa

Date:							
	_	Title	of Committee	or Accou	ınt		
Pay to:							
Note: ATT	ACH INVOIC	F OR STA	ATEMENT WH	IEN POS	SIBI F OR	APPLICAR	RI F
Date			Description			Amount	
	Auto Travel		miles @ .20 (o	ne perso	n)		
	Auto Travel		miles @ .25 (c		,		
	Meals						
	Telephone						
	Postage						
	Other (descr	ribe)					
				;	Subtotal		
					Less		
					Contribution		
Signed		· · · · · · · · · · · · · · · · · · ·		· · · · · · · · ·	Total		
Paid Ck#							
Date Paid							
Approved							
Reviewed			 	 			

Signed is the submitter of the request Approved is the Committee Chair or other Officer Reviewed is the preparer of the check

If multiple dates & mileage amounts, please list Please submit to the Financial Manager at PEIA