

WOMEN OF THE EVANGELICAL LUTHERAN CHURCH IN AMERICA  
Nebraska Synodical Women's Organization



**EXPENSE VOUCHER**

Please attach ALL receipts

Date \_\_\_\_\_  
Name \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Your Conference Name \_\_\_\_\_  
Date of Meeting \_\_\_\_\_

Purpose \_\_\_\_\_

Other  
(explain) \_\_\_\_\_

\_\_\_\_\_ Spring Gathering \_\_\_\_\_ Executive Board  
\_\_\_\_\_ Committee \_\_\_\_\_ Convention

**FOR TREASURER'S USE**

Amount Paid \_\_\_\_\_  
Check No. \_\_\_\_\_  
Date Rec'd \_\_\_\_\_  
Date Paid \_\_\_\_\_  
Approval \_\_\_\_\_

**OPERATING EXPENSES**

Separate expenses for different events – i.e. convention, Spring Gathering, etc.

Telephone \_\_\_\_\_  
Postage \_\_\_\_\_  
Office Supplies \_\_\_\_\_  
Child Care \_\_\_\_\_  
Miscellaneous (explain) \_\_\_\_\_  
**TOTAL \$** \_\_\_\_\_

**TRAVEL**

Car (\$0.40/mile) \_\_\_\_\_  
Parking/Tolls \_\_\_\_\_  
Other \_\_\_\_\_  
**TOTAL \$** \_\_\_\_\_

**FOOD**

Meal  
s \_\_\_\_\_  
**TOTAL \$** \_\_\_\_\_

**LODGING**

Place \_\_\_\_\_  
Number of nights \_\_\_\_\_  
**TOTAL \$** \_\_\_\_\_

**OTHER**

Explain \_\_\_\_\_  
**TOTAL \$** \_\_\_\_\_  
**GRAND TOTAL \$** \_\_\_\_\_

Please submit to Nebraska Synodical Women's Organization Treasurer:

Sandy Terry  
1461 2<sup>nd</sup> Avenue Ct  
Fremont NE 68025-5317  
402-957-4480 (cell)  
Sterry9415@yahoo.com

I hereby certify that this report is a true statement of expenses incurred.

\_\_\_\_\_  
Signature