

EXPENSE VOUCHER • BOARD OF DIRECTORS • PACIFIC NORTHWEST DISTRICT – UUA

(rev.7/1/08)

PLEASE PRINT CLEARLY

Date of request: _____

Make check payable to: _____

Complete address to mail check to: _____

Phone number, including area code, of person submitting voucher: _____

Email address of person submitting voucher: _____

Name of event/purpose: _____

Date and location of event: _____

PNWD budget category for expense: _____

EXPENSE CATEGORY	AMOUNT	NOTES – USE BACK IF NECESSARY
TRAVEL AND RELATED		
Miles driven _____ x \$.505		From/To:
Travel fares: air, train, bus, ferry, taxi, etc.		
Accommodations		Home hospitality encouraged. Hotel reimbursement at single occupancy rate.
Meals		Limited to a three-meal total of \$44 per day, including tips: - Breakfast \$10, Lunch \$14, Dinner \$20 Alcoholic beverages will not be reimbursed.
Other expenses in this category		Be specific:
Subtotal TRAVEL AND RELATED		List all staff or volunteers included in TRAVEL AND RELATED expenses claimed on this voucher.
ADDITIONAL EXPENSES/ADVANCE		
Office supplies		
Postage and shipping		
Printing and copying		
Telephone and communications		
Other expenses in this category		Be specific:
Subtotal ADDITIONAL EXPENSES/ADVANCE		
ADJUSTMENTS		
Minus any advanced funds still outstanding		
Minus any contribution to PNWD		Tax receipts for amounts greater than \$25 can be issued if receipts for donated expenses are included.
TOTAL REIMBURSEMENT REQUESTED		

The above reimbursement request is an accurate and appropriate statement of expenses due.

Your signature _____ Date _____

Please include receipts and complete the voucher clearly and thoroughly. Checks are generally processed at the middle and end of each month.

All reimbursements will be made in accordance with PNWD Financial Policies and Procedures.

Voucher also available at http://pnwd.org/pubs/expvoucher_board.pdf.

Mail completed voucher and receipts to:
 PNWD – UUA
 12700 SE 32nd Street, Suite #E-101
 Bellevue, WA 98005-4317