



United States Women of Today

Expense Voucher

Send completed form to USWT Treasurer.

Name _____ Date _____

Position _____ Total Expenses \$ _____

Address _____

City _____ State _____ Zip _____

Signature _____

Itemize expenses below and attach all receipts with items circled.

Expenses	Description of Expense	Quantity	Amount
Phone			
Postage			
Copies & Supplies			
Other Officer Expenses			
Incentives			
Travel			
Miscellaneous			
Other (explain)			

For Treasurer's Use Only

Budget Account _____ Amount to Debit Account: \$ _____

Budget Account _____ Amount to Debit Account: \$ _____

Budget Account _____ Amount to Debit Account: \$ _____

Paid This Voucher _____ Check No _____

Total Paid Year to Date _____ Paid Date _____

Remaining Budget _____