



Nassau Region
PTA[®]
everychild.one voice.[®]
EXPENSE VOUCHER

Office Use Only	
CHECK# _____	\$ _____
Category _____	\$ _____
Category _____	\$ _____
Category _____	\$ _____
Treasurer's Initials _____	
Date Check Issued _____	

NAME _____

ADDRESS _____

TELEPHONE # _____ ZIP _____

MAKE CHECK PAYABLE TO: _____

Expense incurred as: Officer _____ AD _____ Chairman _____

Special Project: _____
 (Such as: Conference, Workshop, Convention, etc.)

DATE	TYPE OF EXPENSE	PURPOSE/EVENT	AMOUNT
	SUPPLIES		
	POSTAGE		
	PRINTING		
	TELEPHONE		
	OTHER		
	OTHER		
	OTHER		

TOTAL _____

SIGNATURE _____

DATE _____

ASSOCIATE/REGION DIRECTOR SIGNATURE _____

Attach **ALL** bills and/or receipts to white copy

Vouchers must be submitted to the treasurer immediately **but no later than 60 days after expense is incurred**. Expenses pertaining to a particular conference/workshop are to be submitted within two weeks after the event.

Breakfast \$10
 Lunch \$15
 Dinner \$35
per diem allowance for all day travel and/or event is \$60 inclusive
 Mileage reimbursement .485 per mile

SUBMIT: Entire form to Treasurer - Goldenrod copy will be returned for your files