



### Voucher for Reimbursement

District number: 63

Date of request: \_\_\_\_\_

Check payable to (full name): \_\_\_\_\_

Position held: \_\_\_\_\_

Mailing address: \_\_\_\_\_

1. Complete this form.
2. Attach organized receipts. Tape receipts smaller than this piece of paper to a piece of plain white paper. Multiple receipts may be taped to one page. Clearly indicate which amount on the receipt is being requested for reimbursement and note the corresponding number as listed below.
3. Return to the district governor (address below).
4. The district governor reviews, approves, and forwards to the treasurer for payment.
5. Receipts submitted more than 60 days from the date of the expense may be considered unreimbursable.

Mileage Rate: 0.40 per mile

Line	Month of Expense	Currency	Amount	Expense Description (If travel, indicate mileage and rate used in calculation.)	Treasurer's Use Only
					Budget Account Number
1		USD			
2		USD			
3		USD			
4		USD			
5		USD			
6		USD			
7		USD			
8		USD			
9		USD			
10		USD			
			Total:		

#### Approvals

District governor's name (print): Andrea Burnette

District governor's signature: \_\_\_\_\_

Address: 127 Ashland Drive

Date: \_\_\_\_\_

Ashland City, TN 37015

**If a single expenditure is more than \$500 or a check is payable to the district governor or treasurer, a lieutenant governor's approval is required.**

Lieutenant governor's name (print): \_\_\_\_\_

Lieutenant governor's signature: \_\_\_\_\_ LGET or LGM (circle one)

Treasurer's name (print): Eric Stephens

Check number: \_\_\_\_\_

Treasurer's signature: \_\_\_\_\_

Date: \_\_\_\_\_ Date cleared: \_\_\_\_\_

Please remember to attach documentation for each mileage expense