**Print or Type:**

|  |  |
| --- | --- |
| **Form submitted by:** |  |
| **Check to be paid to:** |  |
| **Address:** | Street |  |
| City |  |
| State |  |
| Zip |  |
| **Date:** |  |
| **Fiscal Year:** |  |
| **Committee/Office:** |  |

**Expenses:**

1. If for more than one item, please itemize. Postage, office supplies, mileage, etc. should be listed separately.
2. Save a copy of your expenses. Email this filled out form including scanned invoices or bill receipts to the ASCLS-WA treasurer, Brenda Kochis, email: BrenKoch@comcast.net
3. Expense vouchers must be sent to the treasurer by July 25 of the current fiscal year. Any bills arriving later must be brought to the attention of the treasurer by this date.

|  |  |  |  |
| --- | --- | --- | --- |
| **Date:** | **Item:** | **Amount:** | **Budget Category** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **Treasurer’s Use ONLY** | **Date Paid** |  |
|  | **Check #** |  |
|  | **Paid to:** |  |