

Seattle Gujarati Cultural Society Expense Reimbursement Voucher

SUBMITTED BY: _____

Date: _____

ADDRESS: _____

TELEPHONE: _____

EXPENSE FOR EVENT: _____

Attach Invoices or Receipts to the back of Voucher form

Bill Date	Description	Amount
Total		

Approved By (Focal): _____

Date: _____

Accounting use	Amount	Amount	Amount	Amount
when multiple events are listed	Admin	Drama	Volunteer Appr.	
	Newsletter	Picnic	Holi	
	Postage	Navratri	Kids Camp	
	Website	Diwali	Online Google	
	Storage	GBM		
Total				

Date:

Payment received By: _____

Date: _____

Voucher/Check:

PAID TO NAME: _____