

# DKG Washington State Organization CLAIM VOUCHER

PREPARE 4 COPIES - ATTACH RECEIPTS

Save this form to your computer, open saved form and type in expenses, save form and print four copies and mail all to Financial Chair

Event Site \_\_\_\_\_ Officer or Committee \_\_\_\_\_ Date \_\_\_\_\_

## Explanation of Expense

Travel - Roundtrip	_____	_____	_____
	From	To	Travel With
	_____ Miles X	_____ ¢	_____
Room.....	_____		_____ . _____
Reg.Fee/Scheduled Meals .	_____		_____ . _____
Miscellaneous .....	_____		_____ . _____
Telephone & Fax .....	_____		_____ . _____
Postage .....	_____		_____ . _____
Printing .....	_____		_____ . _____
		Total	_____ . _____

Chair Initials

Check written to \_\_\_\_\_

Complete Address \_\_\_\_\_

Do not write below this line

Acct Charges \_\_\_\_\_

Check No \_\_\_\_\_

\_\_\_\_\_ State President / Finance Chair \_\_\_\_\_ Date

\_\_\_\_\_ Paid by State Treasurer \_\_\_\_\_ Date