



CHARGE TO:

NEW YORK STATE CHAPTER
National Association of Postmasters of the United States

EXPENSE VOUCHER

Pay to the order of _____ Voucher Date _____

Address _____ Purpose _____

_____ Officer Title _____

EXPENSES	TRAVEL DATE	DETAILS	TOTAL
PUBLIC TRANSPORTATION			
MILEAGE ALLOWANCE ._____/MILE			
HOTEL			
MEALS (INCLUDING TIPS)			
TELEPHONE			
PRINTING			
OTHER			
		GRAND TOTAL	

INSTRUCTIONS: PLEASE READ CAREFULLY

- A. Receipted hotel bills and all public transportation expense vouchers must accompany each expense report.
- B. It is required that items of expense be clearly and correctly described and that they represent monies actually expended on official business in behalf of the Association.
- C. When credit cards are used, receipts are to be attached to this report.
- D. Other expenses must be detailed.
- E. **NO PAYMENTS WILL BE ISSUED WITHOUT RECEIPTS.**

Signature of Payee

Approved _____
Secretary/Treasurer

Approved _____ In the amount of _____
President

Paid on _____ Check # _____ Charged to _____