

## *Expense Voucher Request*

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

*Pay to:* \_\_\_\_\_

*Address if to be mailed:*

\_\_\_\_\_

*Total amount(s):* \_\_\_\_\_ *(Must attach receipt to be reimbursed.)*

*For: (Be specific)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Requested by:*

*Approved by:*

*(Must be approved by Ministry leader)*

*Please note: If requesting payment in advance, please remember to tell the vendor that we are TAX EXEMPT PRIOR to ringing up your order! A State Tax Exempt form must accompany your request to be given to them with the check.*

*Need tax exemption form* \_\_\_\_\_ *y* \_\_\_\_\_ *n (It is already on file)*

*Office use only*

*Paid date:* \_\_\_\_\_