

Expense Voucher

Presbyterian Women of Grace Presbytery Coordinating Team (PWGPCT)

Send completed form to:

Joanne McClendon
4904 Courtside Drive, Ft. Worth, TX 76133
817-292-5181 or ajsmc@att.net

**Voucher must be submitted within 60 days
of the event.**

Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone #: _____

Email: _____ Alternate Phone #: _____

As required by IRS, please include the receipt for any single items over \$25.00

Travel and Transportation

Car Expense (Round Trip) Total Miles: _____ x .14 per mile \$ _____

Air Fare/Parking Tolls _____

Lodging _____

Meals _____

Committee Expenses

Copy/Mail/Printing _____

Phone Calls _____

Resources _____

Other expenses (itemizer) _____

Total \$ _____

Amount to be reimbursed \$ _____

Event Attended _____

Date(s) of Event _____

For budget information, please send a record of all PWGPCT expenses. Send a separate voucher for each event as budget allotments may not be in the same category.

Charge to account # _____

Approved by: _____
