

**WOMEN OF THE EVANGELICAL LUTHERAN CHURCH IN AMERICA**  
 Nebraska Synodical  Women's Organization

**EXPENSE VOUCHER**

**FOR TREASURER'S USE**

Please attach ALL receipts

Amount Paid \_\_\_\_\_  
 Check No. \_\_\_\_\_  
 Date Rec'd \_\_\_\_\_  
 Date Paid \_\_\_\_\_  
 Approval \_\_\_\_\_

Date \_\_\_\_\_

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Your Conference Name \_\_\_\_\_

Date of Meeting \_\_\_\_\_

Purpose \_\_\_\_\_

\_\_\_\_\_ Spring Gathering \_\_\_\_\_ Executive Board \_\_\_\_\_ Other (explain) \_\_\_\_\_  
 \_\_\_\_\_ Committee \_\_\_\_\_ Convention \_\_\_\_\_

**OPERATING EXPENSES**

Separate expenses for different events – i.e. convention, Spring Gathering, etc.

Telephone \_\_\_\_\_  
 Postage \_\_\_\_\_  
 Office Supplies \_\_\_\_\_  
 Child Care \_\_\_\_\_  
 Miscellaneous (explain) \_\_\_\_\_  
 TOTAL \$ \_\_\_\_\_

**TRAVEL**

Car (\$0.40/mile) \_\_\_\_\_  
 Parking/Tolls \_\_\_\_\_  
 Other \_\_\_\_\_  
 TOTAL \$ \_\_\_\_\_

**FOOD**

Meals \_\_\_\_\_  
 TOTAL \$ \_\_\_\_\_

**LODGING**

Place \_\_\_\_\_  
 Number of nights \_\_\_\_\_  
 TOTAL \$ \_\_\_\_\_

**OTHER**

Explain \_\_\_\_\_  
 TOTAL \$ \_\_\_\_\_  
**GRAND TOTAL \$ \_\_\_\_\_**

Please submit to Nebraska Synodical Women's Organization Treasurer:

Janet Schmidt  
 2639 South 38th  
 Lincoln, NE 68506  
 402-488-6034 (home)  
 sogsschmidt@inebraska.com

I hereby certify that this report is a true statement of expenses incurred.

\_\_\_\_\_  
 Signature