



# LWML ROCKY MOUNTAIN DISTRICT EXPENSE VOUCHER

Attn: Yvonne Steeby  
 LWML RMD Treasurer  
*treasurer@lwmlrmd.org*

Voucher Submit Date:

Pay to:

Mail to:

Signed:

Keep one copy for your files.

Send one copy of this voucher to the President by mail or email.

Scan or attach any receipts.

Meeting Type Start Date End Date

**Approvals**

VP or Chairman

Date:

Signed:

President

Date:

Signed:

Account	Description	Miles	Amount
	Travel (total miles—amount calculated automatically at 35 cents/mile)		
	Travel (not mileage, such as air)		
	Lodging		
	Meals		
	Supplies		
	Postage		
	Printing		
	Other		
	Other		
		<b>Total</b>	
<b>Donation (Optional)</b>			<b>Donation</b>
			<b>Net Check</b>

**Treasurer Only**

Date Paid:

Check #:

Amount:

Donation:

Signed:

Additional Information (if needed):

**Donation Receipt** Issued to \_\_\_\_\_ in lieu of payment in the amount of \_\_\_\_\_

In the year as noted, this was an added generous gift to our Mite Fund. You received no goods or services other than intangible religious benefits in exchange for this donation. Please keep this receipt for your tax records.

Donation Year: