

## EXPENSE VOUCHER

Income Record

[illegible]

**TOTAL: \$**

**Treasurer's Record:**

**Make Check Payable to:**

Check#

Name \_\_\_\_\_

Date \_\_\_\_\_

**Address**

Deposited Date

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

Phone#

**For Reimbursements: Authorization by Officer of Committee Chairperson:**

**The above items are authorized for payment from or deposit to the PNNC Club Account**

**Officer or Committee Chairperson:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Send completed form/receipts to PNNC Treasurer: Jackie Leipzig 7970 SW 74th Ave Portland OR 97223** All reimbursement/payment requests shall be submitted within 30 days of the expense/purchase. After 30 days, expenses are considered a donation unless the board approves payment.