

**THE JOHN KNOX PRESBYTERY**

1850 Bohmann Drive, Suite 1  
P. O. Box 350  
Richland Center, WI 53581-0350

608-647-8828

800-424-7935

[jkp@jknox.org](mailto:jkp@jknox.org)

**2017 EXPENSE VOUCHER**

Pay To: \_\_\_\_\_ Date \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Purpose of Expense: \_\_\_\_\_

Please itemize expenses below:

<u>Budget Number</u>	<u>Item Title From Budget</u>	<u>Total Amount</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total Due \$ \_\_\_\_\_

I hereby donate the following amount to The John Knox Presbytery.

(A copy of the voucher will be sent to you.)

\_\_\_\_\_

**TOTAL AMOUNT TO BE PAID** \$ \_\_\_\_\_

Paid by Check # \_\_\_\_\_

Date Paid \_\_\_\_\_

Verification Initials \_\_\_\_\_

Signed By: \_\_\_\_\_

Authorized By: \_\_\_\_\_

<b>DATE</b>	<b>DESCRIPTION</b>	<b>AMOUNT</b>
	Auto Travel: Miles @ 20¢ per mile	
	Passenger(s): Miles @ 2¢ per mile	
	Parking	
	Public Transportation	
	Accommodations	
	Meals	
	Telephone	
	Postage	
	Other	