

VFW AUXILIARY - Missouri 2024-2025 Expense Voucher

Complete the information below so you can be reimbursed for your expenses. All official VFW Auxiliary business must have the approval of the Department President. Expense vouchers must be received within **30 days** of the visit or event.

Personal Information: *Please Print Clearly*

Name: _____ Office/Chairmanship: _____ Date: _____

Address (Street, City, State, Zip): _____

Reason for Expense (Auxiliary or District Visit, Chairman Expense, Officer Expense, Representative sent by President, etc. : _____

Total Expenses: (All receipts must be attached to the Voucher)

If District, Auxiliary, or other places, please fill in the info below. Add Google, Ways, or Map Quest ,Link here:

- Date of visit: _____
- Post/Auxiliary and District: _____
- Address of event: _____

- Ending Odometer Reading: _____
- Beginning Odometer Reading: _____
- Total Miles: _____

Mileage from odometer reading

(Take Total Miles X \$.40): ----- \$ _____

Phone: ----- \$ _____

Supplies: ----- \$ _____

Hotel: ----- \$ _____

Airline flight expense: ----- \$ _____

Other: ----- \$ _____

Describe Other Expense: _____

Advance Payment (Check or credit card): ----- \$ _____

Total owed to Department: ----- \$ _____

Total Expense owed to you: ----- \$ _____

Amount in Budget: ----- \$ _____

Attach all receipts to voucher and send to:

Jackie Davis
Department Secretary/Treasurer
3849 Hwy 47 W
Troy, MO 63379

Email voucher to both the
Department President Amy Jo Lett
moamyjo2425@gmail.com

and
Department Treasurer Jackie Davis
vfwauxdeptmo@gmail.com

Office Use Only

Dept President's signature: _____

Date Approved: _____ Voucher NO: _____

Date Processed: _____ Ck no: _____

Amount: _____

This check covers: _____

This Item is allowed in the Budget: _____
