

## VFW AUXILIARY - Missouri 2025-2026 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.

- Date of visit: \_\_\_\_\_
- Post/Auxiliary and District: \_\_\_\_\_
- Address of event: (must be filled in) \_\_\_\_\_

Add Google, Ways or Map Quest  
Map Link here:

- 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 allowed 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 Patti Burge**

[burgeangus39@gmail.com](mailto:burgeangus39@gmail.com)

and

**Department Treasurer Jackie Davis**  
[vfwauxdeptmo@gmail.com](mailto:vfwauxdeptmo@gmail.com)

**Office Use Only**

Ck No: \_\_\_\_\_ Amount: \_\_\_\_\_

Dept President's signature: \_\_\_\_\_

Voucher NO: \_\_\_\_\_

Date Approved: \_\_\_\_\_ Date Processed: \_\_\_\_\_

This check covers: \_\_\_\_\_

This Item is allowed in the Budget: