

# MCEO

## MICHIGAN COMMUNITY EDUCATION OUTREACH

### EXPENSE VOUCHER

Include receipts where applicable

Make three copies: keep one, send two to the President

Date: \_\_\_\_\_ Office you hold: \_\_\_\_\_

Name: \_\_\_\_\_

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

City & Zip: \_\_\_\_\_

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Purpose	Mileage	Supplies	Printing	Postage	Misc.	Treas. Only
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Grand Total \$ \_\_\_\_\_ Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Treasurer: \_\_\_\_\_ Check Number: \_\_\_\_\_ Date: \_\_\_\_\_