



OPTIMIST INTERNATIONAL



DISTRICT EXPENSE VOUCHER

I hereby certify that I have incurred the following expenses in meeting the responsibilities of my office and request reimbursement by the District Secretary-Treasurer within the provisions of the budget and available funds of the district.

DATE _____ SIGNED _____

Indicate nature and purpose of expense: _____

Club Visitation Report enclosed Club Visitation Report submitted on _____

| ITEMS (Attach paid invoice where possible) | AMOUNT |
|---|--------|
| | \$ |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

IF REIMBURSEMENT FOR TRAVEL, INDICATE THE FOLLOWING

| Date | From | To | Miles | Amount or _____ ¢ per mile |
|------|------|----|-------|-------------------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Approved _____ Total Expenses \$
GOVERNOR

TO BE COMPLETED BY DISTRICT SECRETARY-TREASURER

| | | | |
|-------------------------------|-------------|--------|--------------------|
| Budget Account(s) charged to: | Account No. | Amount | Paid by Check No.: |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Date _____ By _____
DISTRICT SECRETARY-TREASURER