

VIRGINIA CONFERENCE UNITED WOMEN IN FAITH EXPENSE VOUCHER

Note: This voucher may cover expenses as outlined in the Standing Rules and other authorized items.

Note items as expense occurs. Please leave Date and Voucher Number Blank.

VOUCHER NUMBER _____ (leave blank) DATE _____ (leave blank)

OFFICER EXPENSE:

Postage _____ Telephone _____

Copying _____ Literature _____

Office Supplies _____ Other Supplies _____

LINK _____ Miscellaneous _____

EVENTS/MEETINGS/TRAVEL:

Meeting/Event _____ Mileage(round trip) _____

Airfare _____ Meals _____

Lodging _____ Miscellaneous Expense _____

Honorarium/Gifts _____

VA Conference Giving:

TO: _____ Amount: _____

Mission Resource Expense: _____

OTHER EXPENSES; _____

TOTAL EXPENSES _____

APPROVED BY CONFERENCE:

President _____

Secretary _____

PAID TO: _____

ADDRESS: _____

Position Held: _____

Checks # _____ Amount Paid: _____

Return to:

Christina Blagg, Conference Treasurer

2160 Ramblewood Rd

Harrisonburg, VA 22801

Email: vaumwtreasurer@gmail.com