



# OPTIMIST INTERNATIONAL

## PNWD EXPENSE VOUCHER

I hereby certify that I have incurred the following expenditures 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 \_\_\_\_\_ Printed Name \_\_\_\_\_ Signature \_\_\_\_\_

Indicate the nature and purpose of the 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 .20 Per Mile

Approved \_\_\_\_\_  
Governor

TOTAL EXPENSES \_\_\_\_\_

**TO BE COMPLETED BY DISTRICT SECRETARY-TREASURER**

Budget Account charged to \_\_\_\_\_ Paid by Check No. \_\_\_\_\_

Date \_\_\_\_\_ By \_\_\_\_\_  
District Secretary Treasurer