



EXPENSE VOUCHER

CLASSIS CHATHAM OF THE CHRISTIAN REFORMED CHURCH

Harry Verburg, Treasurer – 76 Kemp Cr., Strathroy, Ontario N7G 0G3

Name: _____

Address: _____

(include postal code)

Expenses claimed:

<u>Mileage:</u>	<u>Date</u>	<u>KMs</u>	<u>Purpose</u>	<u>Amount</u>
		KMs		
		@ .40/km	for	\$
		KMs		
		@ .40/km	for	\$
		KMs		
		@ .40/km	for	\$
		KMs		
		@ .40/km	for	\$

Other: Please itemize and attach receipts

	\$
	\$
	\$
	\$
	\$
	\$
	\$

TOTAL \$

Signature of claimant: _____

Dated: _____