

**EXPENSE VOUCHER**

**District**

**ALABAMA-WEST FLORIDA CONFERENCE UNITED WOMAN in FAITH**

Type of Meeting/Expense Budget Line Item: \_\_\_\_\_

Date: \_\_\_\_\_ Location: \_\_\_\_\_

Office Requesting: \_\_\_\_\_

Request by \_\_\_\_\_

NAME on Check: \_\_\_\_\_

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

Email: \_\_\_\_\_

Phone # \_\_\_\_\_

*Make sure you put total miles both coming & going*

Miles	TO - FROM	Rate *	TOTAL
		\$ 0.35	\$ -
		\$ 0.40	\$ -

Single

(more than one qualifying)

Qualifying rider \_\_\_\_\_

(Name of Officer & state District / Conference Office held)

**EXPENSES:** (Please itemize and attach receipts)

Description of Expense	Rate Per	Amount
<b>TOTAL:</b>	<b>\$</b>	<b>-</b>

**APPROVED:**

District President \_\_\_\_\_  
 must be signed by at least one / can be email attachment

District Secretary \_\_\_\_\_

Date Paid \_\_\_\_\_ Check # \_\_\_\_\_

District Treasurer (SIGNATURE) \_\_\_\_\_

*All rates are set annually by the AWF-UWFAITH Executive Committee. 24-hour rates for officer reimbursement is \$65 for 2023 with travel separate. Checks will be issued within 10 days of receipt of voucher with all receipts attached. Will not be paid if not properly filled out or receipts not attached. The check must be cashing within two weeks of receipt by bearer.*