



# WLMA Yakima Conference

October 11-13, 2007

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## Expense Voucher / Request for Reimbursement

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

### Make Check Payable to:

Name \_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ ZIP \_\_\_\_\_

Budget Category: \_\_\_\_\_

Chairperson's Approval: \_\_\_\_\_

### Description of Expenses:

- 1) Mileage to approved meetings @ \$.30 per mile x \_\_\_\_\_ miles = \$ \_\_\_\_\_
- 2) Other expenses - please list

Total Claimed: \$ \_\_\_\_\_

**Attach receipts for items purchased**

**Submit to Kathy Kugler, Treasurer  
P.O. Box 50194  
Bellevue, WA 98015-0194  
Phone: 425-822-8959**

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Paid On \_\_\_\_\_ Account \_\_\_\_\_ Check # \_\_\_\_\_