

**MINNESOTA WOMEN OF TODAY
DISTRICT DIRECTOR EXPENSE VOUCHER**

**DUE TO ADMINISTRATIVE VP
BY DATE ON EXECUTIVE
COUNCIL CALENDAR**

 NAME DISTRICT DATE

STATE/EXECUTIVE COUNCIL MEETING LOCATION ROUND TRIP MILEAGE
 _____ _____ _____ @ .10 = \$ _____
 _____ _____ _____ @ .10 = \$ _____

REGIONAL MEETING
 _____ _____ _____ @ .10 = \$ _____
STATE MILEAGE \$ _____

CHAPTER VISITS LOCATION ROUND TRIP MILEAGE
 _____ _____ _____ @ .10 = \$ _____
 _____ _____ _____ @ .10 = \$ _____
 _____ _____ _____ @ .10 = \$ _____
 _____ _____ _____ @ .10 = \$ _____
 _____ _____ _____ @ .10 = \$ _____
 _____ _____ _____ @ .10 = \$ _____
CHAPTER MILEAGE \$ _____

DISTRICT MEETING LOCATION ROUND TRIP MILEAGE
 _____ _____ _____ @ .10 = \$ _____
 _____ _____ _____ @ .10 = \$ _____
DISTRICT MILEAGE \$ _____

GRAND TOTAL MILEAGE **\$ _____**
 Acct 569.04

Signed by _____ Approved by _____

**AVP - Send this form to the
Financial Vice President and the
Executive Director**

FOR ACCOUNTANT USE ONLY
 Check # _____
 Date _____
 Acct. # 569.04 _____