PRESBYTERY OF NEVADA EXPENSE REIMBURSEMENT VOUCHER

See Policy 5 for Information regarding Reimbursement for Presbytery Meetings, Committees & Commissions

Date of Me Place and I	eting: Purpose of Meeting:		
[miles may Airfare	bund trip) [miles x .50] be computed by Direc		\$
TOTAL T	\$		
	(List items on back)	Lodging Meals Other	\$
Signed: Print Name Address:			
Phone or E AUTHORIZ PRINT NAM	ZATION:		

IF NOT TURNED IN AT MEETING, THEN MAIL TO:

** Presbytery of Nevada Director of Finance 2613 Empire Ranch Rd. #22076 Carson City, NV 89706



rev 7/12/22

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See Policy 5 for Information regarding Reimbursement for Presbytery Meetings, Committees & Commissions

Date of Meeting:		
Place and Purpose of Meeting:		
Mileage (round trip) [miles x .50]		\$
[miles may be computed by Direct	or of Finance)	
Airfare		
Rental Car		
Other		
TOTAL TRANSPORTATION		\$
	Lodging	
	Meals	
(List items on back)	Other	
	TOTAL	ΙΦ
	IUIAL	15

PLEASE ATTACH RECEIPTS AND REGISTRATION FORM

Signed:		 				
Print Name:		 				
Address:		 				
Phone or Email	:					
AUTHORIZATION:						
PRINT NAMF/TITI F						

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