

DIVISION VICE TRAVEL EXPENSE VOUCHER

Division Vice President/ Assistant Division Vice President

NAME:	DATE:
ADDRESS:	Division:
	Phone:
PERIOD COVERED FROM _____ TO _____	
PURPOSE: _____	

(Report form on page 2 must be completed to qualify for any reimbursements)

TRANSPORTATION: * (ATTACH MAP-QUEST OF ROUTE TAKEN SHOWING MILEAGE [IRS charity rate applicable .14/mile])

DATE:	DESCRIPTION:	MILES:	Rate Extension

Rooms: (attach all receipts applicable)

DATE:	DESCRIPTION:	AMOUNT:

MISCELLANEOUS/OTHER:

(Detail any other expenses paid out of pocket and attach receipts as applicable)

**** Assistant Division Vice President must attach a copy of the email indicating the request from the Division Vice President to go in her stead to an event/meeting.**

<p>I hereby certify that all items of expense included in this statement were incurred in the discharge of authorized official business; that the amounts are correct; and that they represent proper charges for my duties as DVP/ADVP.</p> <p>SIGNED: _____</p> <p style="text-align: center;">(Division or Assistant Vice President)</p> <p>APPROVED: _____</p>	<p>HQ ACCOUNTING:</p> <p>Total amount Reimbursed _____</p> <p>Check Number _____</p> <p>Check issue date: _____</p> <p>SIGNED _____</p> <p style="text-align: center;">(National Secretary)</p>
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REIMBURSEMENT ONLY FOR: Recruiting for a new Unit, Reviving, or Properly Closing of Unit

Division Report Form

* Please **print legibly** and attach additional sheets as needed

NAME:	PHONE:
DIVISION:	EMAIL:
LOCATION/ UNIT VISITED:	
SPONSORED BY:	
DATE ATTENDED:	

DESCRIBE SPECIFIC INFORMATION AND REASON WHY YOUR WENT TO THIS MEETING AND WHAT THE PURPOSE WAS:

WHAT WAS THE OUTCOME OF THIS MEETING:

INFORMATION FOR THE PRIMARY PERSON YOU CONTACTED AND FOLLOW-UP DATE AND INFORMATION:

Name:	Email:	Phone:
Address:		
Expected Follow-up Date and Information:		

SIGNATURE:	DATE:
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This completed form must be submitted to the NATIONAL HEADQUARTERS along with ALL receipts which you are asking to be reimbursed. Reimbursement is not to exceed your approved budget for the year July 1– June 30 of the fiscal year. All expenses **MUST** be filed in the fiscal year which the expenses occurred.

The National Secretary will forward this report to the President for approval of expenses. Once approved and the check written, the Secretary will send a copy to the Sr Vice President, Jr Vice President, Judge Advocate and Jr Past President.

File a report for each separate event/meeting attended

SEND THIS TO NATIONAL HQ FOR REIMBURSEMENT AS SOON AS POSSIBLE AFTER EACH MEETING