

The Presbytery of New Harmony
Presbyterian Church (USA)

Expense Voucher

Purpose/Function _____

Location _____ Date _____

Travel Expenses	
Mileage Reimbursement (calculation will be based on IRS Approved \$.14 per mile round trip from starting location using Google Maps)	\$ _____
Starting address: _____ _____	
Return address: <i>(if different from starting address):</i> _____ _____	
Other Expenses: (attach receipts)	
Air Fare	\$ _____
Lodging	\$ _____
Meals	\$ _____
Other <i>(list on reverse side)</i> _____	\$ _____
Total Expenses \$ _____	
<small>*Please note that the Presbytery reimburses its volunteers at the IRS volunteer rate.</small>	

PAY TO: _____
please print name clearly or type

ADDRESS (new address or change of address only):

(street or P.O. Box)

(City, State, Zip)

Signature

Authorized by: _____
(must be authorized by moderator of committee, executive or associate presbyter)

For Presbytery Office Use:	Date Paid: _____
	Check No: _____
	Account No: _____