Expense Voucher
Kansas Federation of NARFE Chapters

Name:	Title:
Address	Email and Phone Number:

Type of Expense	***Regular***	***Recruit***	***Conference***	***Total***
Honorarium				
Mileage ** **[Round Trip To ____ & miles.]** **(plus toll/parking)**				
Commercial Fare [To/Purpose]				
Total Travel				
Meals				
Lodging				
Office Supplies **[Including Reproduction Costs]**				
Postage				
Telephone				
Miscellaneous				
Paragraph 409B Conference Exp				
Total Requested Expenses				

When recording travel trips, please note whether this is Regular – Executive Board - Recruiting Please use dates of travel ***Itemize miscellaneous expenses individually. **- Vouchers should be submitted at least quarterly. - **Expenses over six-months old will not be reimbursed.** **- Receipts must be submitted for all expenses claimed.**	**For Payment Mail To:** **Peggy Coder** **4902 Decatur Road** **Effingham, KS 66023** e-mail: pcoder@yahoo.com Telephone: (913-833-4925)	

Signature: _____ Date: _____