Weekly Expense Voucher

Name: Check #

LOST TIME

Day	Date	Hours	Explanation	
Mon				
Tues				
Wed				
Thurs				
Fri				
	TOTAL	0		

MILEAGE

Date	From	To	To	To	Total

Total 0

EXPENSES

Date	Parking	Meals	Misc Expenses	Explanation	
Totals	0.00	0.00	0.00		

Per Diem: Days @ (City, State)

Exe. Bd Allow.	Phone Allow	401K Deductions

Employee Signature

President Date

Secretary-Treas Date

Office Use:

Hours	Mileage	Parking	Meals	Misc Exp	Per Diem	Ex Bd	Phone	401K