



Ohio State Firefighters' Association  
Expense Voucher

Date Submitted \_\_\_\_\_

Date Incurred \_\_\_\_\_

REASON FOR EXPENSES \_\_\_\_\_

Expenses of \_\_\_\_\_  
Committee(s) \_\_\_\_\_

MILEAGE \_\_\_\_\_ Miles @ \_\_\_\_\_ per mile Amount Total \_\_\_\_\_

MEALS Amount Total \_\_\_\_\_  
 In State  Out of State

LODGING Amount Total \_\_\_\_\_  
Receipt  Yes  No Master Bill  Yes  No

EQUIPMENT Amount Total \_\_\_\_\_  
Receipt  Yes  No

POSTAGE Amount Total \_\_\_\_\_  
Receipt  Yes  No

PRINTING Amount Total \_\_\_\_\_  
Receipt  Yes  No

PHONE Amount Total \_\_\_\_\_  
Receipt  Yes  No

MISC. Amount Total \_\_\_\_\_  
Receipt  Yes  No

Reimbursement Total \_\_\_\_\_

Check #  Date \_\_\_\_\_

\_\_\_\_\_  
President

\_\_\_\_\_  
Expenses Submitted By

\_\_\_\_\_  
1st Vice President

\_\_\_\_\_  
Committee Chairman

\_\_\_\_\_  
2nd Vice President

\_\_\_\_\_  
Secretary/Treasurer