MEA VOUCHER

TYPE: Income / Expense (circle one)

Submitted by: _____

Date: _____

INCOME/RECEIPT OF FUNDS:

Source: _____ Amount: $_____
(Organization's/Person's Name)

Purpose: (check one) ____Dues ____Other _____

Deposited: ____Primary Checking Account ____Secondary Checking Account ____Savings Account

Date of deposit: _____ By: _____
(Person responsible for deposit)

EXPENSES:

Major Budget Category: _____ Subcategory: _____

Check payable to: _____ Amount: $_____

Documentation: ____ Receipt attached ____ Mileage ($.405 X ___ miles)

Request: ____ Approved ____ Denied (Reason: _____)

Reviewed by: _____ Date: _____

_____ _____

NOTE: All expenses must have two signatures from current executive council officers before payment is tendered.

DOCUMENTATION:

Recordkeeping (Deposit recorded OR check written/sent and recorded in register and budget) for this transaction was completed on _____ (Date) by _____. (Initials)

6-22-2011