

Gahanna-Jefferson Education Association

Expense Voucher

Submitted by _____

Building _____

A receipt must accompany all expenses, with the exception of mileage.

	Account	Description (purpose of expense)	Amount	Paid Check Number
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
		Total	\$	

Please sign:

Signature

Office Use

Date Submitted: _____

Date Paid: _____

Treasurer Signature