

# Evergreen State Volkssport Association

## Reimbursement Voucher

Member \_\_\_\_\_

Date \_\_\_\_\_

Reimbursable Items		Amount
Expense	Description	
Photocopies		
Postage		
Telephone		
<b>SUB-TOTAL</b>		

**MILEAGE**

DESTINATION	Beginning Odometer	Ending Odometer	Total Miles	Rate	Amount
<b>MILEAGE AMOUNT</b>					
<b>TOTAL AMOUNT</b>					

**PLEASE ATTACH SUPPORTING DOCUMENTS, INCLUDING SUPPORT FOR MILEAGE CALCULATION SUCH AS THE MILEAGE CALCULATION FROM GOOGLE MAPS, OR ANOTHER SIMILAR SOURCE.**

I certify that the total miles described above include only mileage to and from an ESVA event and any mileage used while volunteering my time that is directly related to an ESVA event.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

APPROVED \_\_\_\_\_ PAYMENT REFERENCE \_\_\_\_\_ DATE \_\_\_\_\_

SEND TO: Evergreen State Volkssport Association Treasurer  
3742 SW 313th St., Federal Way, WA 98023-2142