

NATIONAL SKI PATROL SYSTEM • NORTHERN MICHIGAN REGION EXPENSE VOUCHER

Program Name _____ Budget Account _____ Date _____

ITEMIZE EXPENSES USING THE FOLLOWING TABLE - PLEASE ATTACH ALL RECEIPTS

| DATE | DESCRIPTION | TRANS- PORTATION | LODGING | MEALS | TELEPHONE POSTAGE | OTHER | ACCOUNT#S | |
|------------|-------------|---------------------|---------|-------|----------------------|-------|-----------|-------|
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| SUB TOTALS | | | | | | | | TOTAL |

I have incurred the above expenses in behalf of the NSPS NMR

Signed _____

Print Name _____

Phone # _____

DO NOT WRITE BELOW • FOR OFFICE USE ONLY

APPROVAL SIGNATURES

| | | |
|--|-----------------|------|
| | Title | Date |
| | Region Director | Date |
| | Treasurer | Date |

NOTES:

MAILING LABEL PRINT CLEARLY

Remit to:

VOUCHER DISBURSEMENT

| Account | Amount |
|---------|--------|
| | |
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| | |
| | |

| DATE | AMOUNT | CHECK # |
|------|--------|---------|
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