



**OREGON DISTRICT  
LUTHERAN WOMEN'S MISSIONARY LEAGUE**

**EXPENSE VOUCHER  
2024 - 2026 Biennium**

PLEASE PRINT

Payable to: \_\_\_\_\_

Address: \_\_\_\_\_

(Treasurer's Use Only)	
Check#	_____
Date	_____
Amount	_____

**MILEAGE:**

Name of Meeting: \_\_\_\_\_ Date of Meeting \_\_\_\_\_

Place of Meeting: \_\_\_\_\_ Miles from \_\_\_\_\_ to \_\_\_\_\_

TOTAL Miles (round trip) \_\_\_\_\_ @ 0.30 per mile = Mileage Expense Total \_\_\_\_\_ 0.00

OTHER EXPENSES: (attach invoices/receipts)	Description	Amount
	_____	_____
	_____	_____
	_____	_____
	<b>Total Other Expense</b>	<b>0.00</b>

Total Expenses \_\_\_\_\_ 0.00

Less advances/donations \_\_\_\_\_  
 (Donations are appreciated, but not expected.  
 Please enter amount of total you wish to donate and initial)

Net Check \_\_\_\_\_ 0.00

Signed \_\_\_\_\_

Approval: \_\_\_\_\_

Position \_\_\_\_\_

(Vice President) \_\_\_\_\_ Date

Date \_\_\_\_\_

\_\_\_\_\_  
(Committee Chairman) \_\_\_\_\_ Date

\_\_\_\_\_  
(President) \_\_\_\_\_ Date