



Reimbursement Voucher

Email: lukesctreasurer@gmail.com

Date: _____ LSC Voucher #: _____ Check #: _____

Committee/Fund: _____

Received from/Paid to: Name: _____

Address: _____

Description	Amount
TOTAL	

This transaction is submitted for execution and recording by the Treasurer. The items and amounts listed above are true and correct to the best of my knowledge and are authorized by the LSC Board. Attached herewith are all sales slips, receipts, bills, invoices, statements, or vouchers representing this transaction.

Chairman's Signature: _____

Treasurer's Certification:

The items and amounts listed above are true and correct to the best of my knowledge and were received/dispursed by me in accordance with the current LSC Board approval as started in the minutes.

Treasurer's Signature: _____