



FOR TREASURER'S USE

Division # _____
Date Voucher was Paid _____
Check Number _____
Amount of Check _____

Sheet _____ of _____

DIVISION # _____

DIVISION EXPENSE VOUCHER

(On the reverse side of this form are guidelines regarding expenditures and documentation requirements.)

P L E A S E P R I N T O R T Y P E

Name of Payee _____ Address _____

Telephone _____ City, State, Zip _____

DATE PAID

AMOUNT PAID

DESCRIPTION OF TRANSACTION *(Be Specific – see instructions on reverse)*

[Large empty box for transaction description]

DIVISION COUNCIL CERTIFICATION

I certify that the above expenses were incurred for PEF business and proper receipts for all expenditures listed are attached.

Signature of Division Council Leader _____ Date _____

Signature of Division Council Treasurer _____ Date _____

VENDOR CERTIFICATION

Received from PEF Division # _____ \$ _____

Signature of Payee _____ Date _____