

Daughters of Penelope

Supreme Headquarters
1909 Q Street, NW
Suite 500
Washington, DC 20009



Tel: 202.234.9741
Fax: 202.483.6983
www.daughtersofpenelope.org
E-mail: dophq@ahempa.org

DISTRICT GOVERNOR'S SEMINAR EXPENSE VOUCHER

NAME: _____ **DISTRICT:** _____

ADDRESS: _____ **CITY:** _____

STATE: _____ **ZIP CODE:** _____

AIR AND/OR TRAIN TRAVEL:

FROM: _____ **TO:** _____ **Date** ___/___/___ **To** ___/___/___

AMOUNT: \$ _____

DRIVING/MILEAGE:

FROM: _____ **TO:** _____ **Date** ___/___/___ **To** ___/___/___

TOTAL MILEAGE: _____ x \$0.35 Per Mile

AMOUNT: \$ _____

LODGING:

PER DIEM: _____ **Days at \$** _____ **AMOUNT: \$** _____

MISC. (TAXI, LIMOUSINE): _____ **AMOUNT: \$** _____

TOTAL AMOUNT REQUESTED: _____

PLEASE ATTACH A PHOTOCOPY OF AIRPLANE TICKETS, TRAIN TICKETS AND MISCELLANEOUS RECEIPTS TO YOUR VOUCHER. VOUCHERS WITHOUT A SIGNATURE ARE INVALID.

Signed: _____ **Dated:** _____

Approved By: _____

Date Paid: _____ **Check No.** _____ **Total Amount Paid: \$** _____