

Guidelines Check List

The Delta Kappa Gamma Society International
Mu State Organization

Expense Voucher

Please check the appropriate approvable items.

____ State Officer / Committee Chair

Date _____

____ Committee Member attendance requested

Person making request: _____

____ Special activity requested by President

Check should be made out to: _____
(If different from above)

____ Mileage: miles (roundtrip) _____ X \$0.30 + tolls _____

Address: _____

____ Economy air fare

Position: _____
(Officer, Committee Chair, etc.)

____ 1/2 lodging or less

Before filling out this section, complete the "Guidelines Check List".

____ Registration

1. _____ \$ _____

____ Printing

2. _____ \$ _____

____ Postage

3. _____ \$ _____

____ Telephone

4. _____ \$ _____

____ Receipts (include tolls)

5. _____ \$ _____

____ Society business (not included in registration)

Total amount: \$ _____

____ Other: Explain on separate sheet

Signed: _____

____ Sign, mail to Mu State President

Signed by Committee Chairman: _____ Date: _____

____ Mail before **June 1** of fiscal year

Approved by President: _____ Date: _____

Voucher must be mailed by June 1 of the fiscal year to the State President, not directly to the State Treasurer.