



Department of Alabama Disabled American Veterans Expense Voucher



Expense Voucher No. _____

I hereby request reimbursement for expenses incurred by me on D.A.V. Department of Alabama business on

(Date) _____

Travel From _____ To _____ and return

Total miles traveled _____ @.35 Per Mile \$ _____

Other Expenses

Table with 2 columns: Description, Amount (\$). Includes a Total Expenses row at the bottom.

I certify the above expenses were used for the purpose stated as follows: _____

This is to certify that this expense voucher submitted by the undersigned to the Department of Alabama and thereafter reimbursed by the Department of Alabama to the undersigned (or in the case of cash advances, Accounted for) was not reimbursed by anyone else, and it was, in my judgment, expended solely and Exclusively for the purposes connected with the performance of my duties in my executive capacity with the Disabled American Veterans.

Signed _____ Title _____ Date _____

Approved by _____ Date _____

Department Commander

Date _____

Department Senior Vice Commander

Paid by Check Number _____ Dated _____

Paid Amount \$ _____ Department Treasurer _____

(Comments)