

**WESTERN OHIO WOODWORKING CLUB  
EXPENSE VOUCHER**

Date \_\_\_\_\_

\_\_\_\_\_  
Name of Person or Business check is to be made payable to

\_\_\_\_\_  
Address

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
City State ZIP

DATE	Description of Item or Service purchased and the reason for purchase	AMOUNT
PLEASE ATTACH APPLICABLE RECEIPTS, STATEMENTS, INVOICES		TOTAL

\_\_\_\_\_  
Signature of WOW member authorizing  
this expense

TREASURER'S RECORD OF PAYMENT:

W.O.W.  
CHECK NO. \_\_\_\_\_ DATE \_\_\_\_\_ AMT. \$ \_\_\_\_\_