

Maryland School Nutrition Association Expense Voucher

for treasurer's use only

Name _____	Check Number _____	Date Paid _____	Committee Budget _____
Phone _____ Address _____			
EMAIL _____ Chapter/Committee _____			

Travel Expenses Please include complete street addresses, including zip code. Mileage will be verified using MapQuest. Anne Arudel Co. Meeting Location: 2664 Riva Rd., Annapolis, MD 21401

Date	Starting Address	Destination Address	Miles Traveled	Mileage	Hotel	Breakfast	Lunch	Dinner	Other Expenses (please explain here and put \$ in next box)	Other Expenses
Total Travel Expenses			0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00

Committee Expenses		
Date	Explanation	Total
Total Committee Expenses		\$0.00

Summary of Expenses	
Committee Expenses	\$0.00
Mileage	\$0.00
Hotels	\$0.00
Meals(add breakfast, lunch and dinner)	\$0.00
Other Expenses	\$0.00
Total from previous page(s)	
Total Expenses	\$0.00

Total Allowable Expenses	\$0.00
Minus Advanced Funds	
Total Reimbursement	\$0.00

Signature of Person Submitting Voucher	date
Signature of Treasurer	date

Submit Completed Voucher with Receipts to : Patsy Kreppel, MSNA Treasurer, 3815 Bayville Road, Baltimore, MD 21220