



FRATERNAL ORDER OF POLICE
SOUTH METRO LODGE #14
EXPENSE VOUCHER

Date _____
Name _____
Title _____
Address _____
City _____ State _____ Zip _____
Date Incurred and Reason _____

Salary..... _____ (Days) X \$ _____ (Per Day)..... \$ _____
Transportation _____ (Miles) X \$ _____ (Per mile)..... \$ _____
Airfare..... _____ \$ _____
Hotel..... _____ (Nights) X \$ _____ (Per Night)..... \$ _____
Meals..... _____ (Days) X \$ _____ (Per Day)..... \$ _____
Miscellaneous _____ \$ _____
..... _____ \$ _____
..... _____ \$ _____
..... _____ \$ _____
..... _____ \$ _____
TOTAL..... \$ _____

Member=s Signature _____
President Approval _____ Date _____
Secretary Approval _____ Date _____
Treasurer Approval _____ Date _____

This report is to be completed by the person to whom money is owed, and forwarded to the Lodge President or his designee for approval. The form will then be forwarded to the Lodge Treasurer for reimbursement to the member and maintenance in the lodge files.