

Fourth Division Pacific Northwest Region National Model Railroad Association



Expense and Reimbursement Voucher

То:	Robin Peel
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Subject: Record of approved expense item and request for reimbursement

The attached ORIGINAL sales receipt(s) covering the following expenses were incurred on behalf of Fourth Division.

Account assignment	Check #	
Date Received	Date Paid	
TREASURER USE ONLY:		
City:	State: Zip:	
Address:		
Send check to: Name:		
Date:		
Approved by:Position:		
Signed (by individual who incurred ex	pense):	
Committee/Task:		
Purpose or use:		
Purchased from:		
Item purchased:		
Other (please specify	/)	
Method of Payment: PayPal Ch		