

**Missouri Union Presbytery
Voucher**

Date: _____ Committee, Team or Commission: _____

Name: _____

Address: _____

City, State, Zip: _____

Date Expense Incurred: _____

Mileage: _____ x \$0.625 per mile = \$ _____

(Attach receipts for following charges)

Meals: \$ _____

Overnight: \$ _____

Other (please list):

_____ \$ _____

_____ \$ _____

_____ \$ _____

\$ _____

TOTAL: \$ _____

Please deduct from the above expense, the sum of \$ _____
which I am making as a gift to Missouri Union Presbytery.

Less Contribution - \$ _____

Total Requested \$ _____

Requestor's Signature: _____

Approval by
Committee, Team, or Commission Moderator

General Presbyter

Email voucher to: office@mupresbytery.org

Or

Send voucher to: Missouri Union Presbytery
3236 Emerald Lane
Suite 500
Jefferson City, MO 65109

Account #: _____

Check #: _____

Date Paid: _____