

Sun City Grand Lady Putters

Expense Voucher

Please complete the form to request reimbursement of expenses for club business. Attach receipts and submit to either the LP President or your Committee Chair.

Name: _____

Address: _____

Date: _____

Function: _____

Expenditures

Description: Credit Debit Check Amount \$ _____

LP President Approval _____

OR

Committee Chair Approval _____

Date approved _____

Date approved _____

LP Treasurer Date paid _____

Check # _____