

Operations Expense Voucher
Joint Council of Extension Professionals

Please complete and submit to:

Stan Moore
JCEP President
MSU Extension
P.O. Box 427, Bellaire MI 49615
Phone: 231-533-8818
moorest@msu.edu

Voucher Number _____ *Attach original statements or receipts.*

Individual/Business Payee: _____

Address: _____

Expense for: National Leadership Conference ____ PILD ____ General ____ Galaxy IV ____

<i>Date</i>	<i>Purpose of Expense</i>	<i>Amount</i>

Grand Total _____

I certify that the above stated expense items were incurred for official business of JCEP.

Person Submitting: _____ Date Submitted: _____

Signature: _____

Office/Position: _____

Approved by JCEP President: _____ Date Approved: _____

Paid by JCEP Treasurer _____

Date Paid: _____ Check Number: _____