

**PRESBYTERY OF SUSQUEHANNA VALLEY**  
5811 Heritage Landing Drive, 2nd Floor, East Syracuse, NY 13057-9360  
Email with Receipts attached to: [finance@susvalpresby.org](mailto:finance@susvalpresby.org)

One trip per voucher

**2017 Committee Expense Voucher**

Payable to \_\_\_\_\_ Address \_\_\_\_\_

Date of trip \_\_\_\_\_ Location/Purpose of trip \_\_\_\_\_

_____miles @.535 per mile in 2017	\$ _____	CLP operating - 700101
Telephone	\$ _____	CLP program - 700104
Meals	\$ _____	CLP scholarships - 700105
Other _____	\$ _____	

**TOTAL** \$ \_\_\_\_\_

I wish to be reimbursed YES / NO **Check one**

I wish to be reimbursed only this amount \$ \_\_\_\_\_

Budget Account to be charged \_\_\_\_\_ Account # \_\_\_\_\_

Signature of Requestor \_\_\_\_\_ Approved by \_\_\_\_\_  
(Chair of Committee or Authorized Signature)

rev 12/15/2016

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