

**Expense Voucher
Multiple District 5M**

Name: _____
 Office: _____
 Date Submitted: _____
 Make Check Payable to: _____

Date	Travel Purpose	Mileage	Amount	Lodging Location	Amount	Meals	Miscellaneous Phone, Postage etc.	Amount
Totals								

Allowable Expenses Send completed voucher with receipts to:

Rules of Audit - Lions Clubs Intl:
 Mileage US\$.41 per mile (US\$.25 per kilometer)
 Meals Not to Exceed US \$25.00 Per Meal & \$50.00 Per Day
 Lodging Not to Exceed US \$75.00 Per Night

Bob Harms
 MD5M Lions
 1046 36th Ave N.
 St. Cloud, MN 56303

Mileage: _____
 Lodging: _____
 Meals: _____
 Misc: _____
 Grand Total: _____

I certify that the above expenses were incurred by me and that they are true and accurate.
SIGNATURE _____