



EPSILON SIGMA ALPHA

## EXPENSE VOUCHER

*Please fill in the form below and send to the SERC Treasurer.  
Please include all receipts.*

**TO: SERC Treasurer**  
**See SERC Executive**  
**Board Roster for**  
**information**

**FROM:**

**OFFICE:**

**ADDRESS:**

**CITY/ST/ZIP:**

**EMAIL:**

### FOR TREASURER'S USE ONLY

VOUCHER #: \_\_\_\_\_

CHECK #: \_\_\_\_\_

ACCOUNT #: \_\_\_\_\_

DATE PAID: \_\_\_\_\_

**FOR:**

	\$
TOTAL	
<b><i>TOTAL AMOUNT OF THIS VOUCHER</i></b>	

*Please itemize expenses and attach all receipts.  
Send two copies to the Treasurer.  
Make a copy for your files.*

**MAKE CHECK PAYABLE TO:**

**ADDRESS (if different from above):**

**SIGNATURE** \_\_\_\_\_