Delta Sigma Theta Sorority, Incorporated Austin Alumnae Reimbursement Voucher Form

Date Requested			Issue Check Payable To		
Submitted By (Name and Email)			Address		
Total Requested			City/State/Zip		
Committee/Office			Activity		
List each expense item	separately below:				
Vendor		Type of E	Expenditure		Amount
				Total	
Approved By:					
Committee Chair				Date	
President				Date	
Treasurer				Date	
NOTES : (1) Typing your name using a script or italic font is not permissible. Ink to paper signatures is required. (2) Vouchers received the Sunday before Chapter Meeting through the 15 th of the month will be mailed by the 20 th of the month. Vouchers received between the 16 th of the month and the Saturday before the Chapter Meeting will be available at the Chapter Meeting unless you request the check to be mailed.					
To be completed by the Treasurer:					

Date Check Issued

Check #

Check Amount