

ARCH and Aging Concerns

For detailed instructions on all Voucher Forms, please visit nyym.org/reimbursements

This voucher is for expenses related to the mission of a fund, such as a grant or attendance at a conference.

Funding Source

(Select which fund should be charged – *one form per fund*)

<u>Expense</u>	<u>Account</u>
Administrative Expenses	5510-00
Staff Travel	5540-00
ARCH Programs	8150-00
Aging Concerns Committee	8290-00

This is a Class ARCH expense

Requested By

(Usually this is the name of the person filling out this form)

Name _____ Date _____

Details

Payable to (Organization or Beneficiary)

Total Amount _____

Purpose/Reason (short description of the expense)

Name _____

Address _____

City/State/Zip _____

Approval and Submission Details

- Remember to attach your supporting documentation: invoices, receipts, travel vouchers, minutes, etc.
- If sending voucher by email, send this completed form to vouchers@nyym.org, and copy the approver on the email requesting a confirmation email.
- No approval is needed if the expense is documented in an attached minute.
- If this payment is for services, such as an honorarium or meeting facilitator, a copy of the W-9 form for the individual or business must be on file in the office before payment can be made

If sending voucher by mail, approver signature:

Approver: _____

If expense already paid:

- Office account check # _____
- Debit card on office account
- EFT from main checking account
- Debit card on main checking account