



MACRAO

Michigan Association of Collegiate Registrars and Admissions Officers

EXPENSE VOUCHER REQUEST

Complete this form and obtain the responsible Committee Chair's signature. The Committee Chair shall forward this form to the current MACRAO [President](#) for his/her signature. Expense vouchers must be signed by the President before payment/reimbursement will be issued by the Treasurer. Please itemize each expenditure and include appropriate receipts. Attach additional documentation as necessary.

Requested by: _____

Date: _____

Responsible Committee: _____

Item Description (please include specific detail such as events, dates, location, etc.)	Amount(s)
1)	\$
2)	\$
3)	\$
4)	\$
5)	\$
6)	\$
7)	\$
Total Requested:	\$

Payable to: _____

Approvals (Signatures): _____

Name

Committee Chair Date

Institution/Company

President Date

Address

Treasurer Date

City State Zip

Check: _____ Ledger: Y N

Date Mailed: _____