South Side High School PTA

Expense Voucher

Name				
Address			5	
Phone	#			
Email A	Address:			
Make C	heck Payable to:			
Treasurer's Initials:		Date:		
Date	Type of Expense	Purpose / Event	Amount	
		THE PAYOR AND TH		
				· · · · · · · · · · · · · · · · · · ·
		Grand Total		
Signature:		Date	ə:	
Drooide	antia Cianatura:			
(require	ent's Signature: d for non-budgeted expense	s)	nordered in gloring and also gloring and assessment	
(a budgeted experies	-,		
Attach	original bills/receipts*			

*Kindly submit bills/receipts promptly after expense is incurred (within 30 days)