**Coldwater Exempted Village Schools**
**Expense Voucher**

**Name** _____ **Date** _____

**Purpose** _____

| Date | From | To | Mileage Total | Mileage Expense | Meals | Hotel | Parking | Misc. Items List | Remarks |
|---|---|---|---|---|---|---|---|---|---|
| | | | | $0.00 | | | | | |
| | | | | $0.00 | | | | | |
| | | | | $0.00 | | | | | |
| | | | | $0.00 | | | | | |
| | | | | $0.00 | | | | | |
| | | | | $0.00 | | | | | |
| | | | | $0.00 | | | | | |
| | | | | $0.00 | | | | | |
| | | | | $0.00 | | | | | |
| | | | | $0.00 | | | | | |
| | | | | $0.00 | | | | | |
| | | | | $0.00 | | | | | |
| | | | | $0.00 | | | | | |
| | | | | $0.00 | | | | | |
| | | | | $0.00 | | | | | |
| | | | | $0.00 | | | | | |
| | | | | $0.00 | | | | | |
| **Totals** | | | | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | |

**Total Amount of Reimbursement** $ 0.00

**All expenditures wherever possible must be accompanied by receipted vouchers or sales tickets.**

**Approved by:**_____

**Date:**_____