

ACCOUNTING & FINANCIAL POLICIES AND PROCEDURES MANUAL  
 UPDATED AND EFFECTIVE: **November 1, 2017**

NORTHWEST COMMUNITY ACTION, INC.  
 OUT-OF-AREA TRAVEL VOUCHER

Employee Name: \_\_\_\_\_ Employee Number: \_\_\_\_\_  
 Designated Duty Station: \_\_\_\_\_ to \_\_\_\_\_ Program: \_\_\_\_\_  
 Report for: \_\_\_\_\_ Purpose of Travel: \_\_\_\_\_

Date	Points of Travel	Time of Departure/Return	Odometer Start	Odometer End	Total Miles	Lodging	Meals	Other Costs

This travel voucher is accurate and complete. I understand that false information of this travel voucher is reason for dismissal.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_  
 Total Miles \_\_\_\_\_ x (rate) \_\_\_\_\_ \$ \_\_\_\_\_  
 Lodging (Receipt Attached) \_\_\_\_\_ \$ \_\_\_\_\_  
 Meals \_\_\_\_\_ \$ \_\_\_\_\_  
 Other \_\_\_\_\_ \$ \_\_\_\_\_  
 Other \_\_\_\_\_ \$ \_\_\_\_\_  
 Total Expense \$ \_\_\_\_\_  
 Less Advance \$ \_\_\_\_\_  
 Reimbursement Amount \$ \_\_\_\_\_  
 Report Checked by: \_\_\_\_\_