EXPENSE VOUCHER FOR THE DEPARTMENT OF KANSAS VFW

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I hereby mak	e claim for reimbur	sement of the above	ve authorized exp	enses for period	l ending	20
Signed			Print Your Nam	ie.		
Your Title						
Department Co statements must least once each June 20 th .	tual expenses by public ommander. District exp t be accompanied by ho month. Expenses for the	enses must be appr tel bills, telephone bi	oved by District C lls, visitation reports st be approved and s	ommander and D and be submitted	epartment Comm to the Departmen	nander. Expense nt Commander at
APPROVEI		(_APPROVED_	Description	: Commander	
	District Command		** ** SE			
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