

Vermont Dietetic Association
Executive Board Meeting Expense Form

- Do not combine expenses from more than one committee or office on one form.
- Attach appropriate receipts or statements.
- Attach a copy of telephone bill when requesting reimbursement for telephone expenses and state below purpose of call(s). If you wish, you may include a copy of a completed telephone log along with a copy of your bill.

Date: _____

Name: _____

Committee / Office: _____

Purpose of expense	Cost
	<p style="text-align: right;">_____</p> <p>Total: \$</p>

Check to be mailed to: Name: _____

Mailing address: _____

- Send completed form and receipts / statements to the Member at large
- Program committee – forward to treasurer

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For use by Treasurer / Member at large:

Member at large signature : _____ Date : _____

Paid by : _____ Date paid : _____ Check number : _____