

**Thomas Jefferson District of UUA**  
Cyndy Bailes, District Treasurer  
PO Box 6313  
Oak Ridge, TN 37831

**Expense Voucher**

Date: \_\_\_\_\_

Address to which check should be mailed:

Name: \_\_\_\_\_

Street Box: \_\_\_\_\_

City, St., Zip: \_\_\_\_\_

Reason for Expense: \_\_\_\_\_

TJD Budgetline to be debited: \_\_\_\_\_

**Reimbursement requires receipt(s)**

Date	Nature of Expenditure	Full Amt. Pd.	Reimbursement Requested
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I certify that the above expenses were authorized and necessary to conduct business for the Thomas Jefferson District of the Unitarian Universalist Association.

Signed: \_\_\_\_\_