



UKRAINIAN AMERICAN VETERANS, INC.



**EXPENSE VOUCHER
(other than travel)**

DATE: _____

PAYEE: _____

ADDRESS: _____

ITEM: _____ **AMOUNT:** _____

ITEM: _____ **AMOUNT:** _____

ITEM: _____ **AMOUNT:** _____

ITEM: _____ **AMOUNT:** _____

ITEM: _____ **AMOUNT:** _____

ITEM: _____ **AMOUNT:** _____

ITEM: _____ **AMOUNT:** _____

ITEM: _____ **AMOUNT:** _____

TOTAL: _____

For Use by Finance Officer Only:		
CHECK #: _____	DATE PAID: _____	AMOUNT: _____
APPROVED BY: _____		
Printed Name	Signature	Date

UAV National Finance Officer
201 Osprey Point Dr
Osprey, FL 34229-9234
email: uavfinance@gmail.com