

EOP REIMBURSEMENT VOUCHER (2015)

Send to: Eastern Oregon Presbytery
Pete Wells, Treasurer
813 NW Ellis Avenue
Pendleton, OR 97801

Pay to: _____

Address: _____

City: _____ Zip: _____

Charge to: _____

Occasion of Expense: _____

Place: _____ Date: _____

Approved by: _____

Please donate my reimbursement to Presbytery

1/10/15

Travel:

Round Trip Miles = _____

Individual @ \$0.2875 = \$ _____

Two or more @ \$0.3275 = \$ _____

Other:

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

Total: \$ _____

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