

2018-2019 EXPENSE VOUCHER

Please fill in the form below. When completed, print and send to the State Treasurer.

Receipts <u>MUST</u> accompany this voucher for payment.

| ТО: | KY State Treasurer 4001 Delaware Drive Lagrange, KY 40031 ladydibari@gmail.com | | FOR TREASURER'S USE ONLY VOUCHER: CHECK#: | | |
|---------------|--|------------|---|------------|--|
| | | | | | |
| | | | | | |
| | | | ACCOUNT#: | | |
| ED ON A | | | DATE PAID: | | |
| FROM: | | | | | |
| OFFICE: | | | | | |
| ADDRESS | 3 : | | | | |
| CITY/ST/Z | ZIP: | | | | |
| EMAIL: | | | | | |
| FOR: | | | | | |
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| | TOTAL | L AMOUNT (| OF THIS VOUCHER | | |
| Mak | Please itemize ex e 2 copies, mail one to the | | | our files. | |
| MAKE CH | ECK PAYABLE TO: | Vicky Jone | es | | |
| ADDRESS | (if different from above): | | | | |
| | | | | | |
| | | | | | |
| SIGNATURE: | | | | | |
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