

## New Jersey State First Aid Council, Inc. EMS Council of New Jersey



2040 Millburn Avenue, Suite 102-1 Maplewood, New Jersey 07040

<b>Expense</b>	Vouchei	<u>^</u>	Dι	ue: The Wednesd	ay prior to a Boa	rd of Trustees meeting.
Pay to	Requested by					
Name: Address:			Name: Title: Signatur Date:	e:		
Budget Categor	-				-	tiple budget categories.
Committees & Programs Executive Officers Professional Services Scholarships	☐ Cadet ☐ Newsletter ☐ President ☐ Treasurer ☐ Accounting ☐ Cadet	☐ Supplies ☐ Area Vice Presion☐ Assistant Treasu	ırer ⊐ Legal	☐ Election ☐ Other ☐ Secretary ☐ General boa ☐ Medical Ad pf ☐ Other	☐ Membersl ard expenses visor	☐ Public Relations
Expense Detail	Legible rece	ipts must be provide	d. If possible, co	ontact the Treasu	rer ahead of time	e to avoid NJ Sales Tax.
Travel Detail					Travel reimburs	sement rate: \$0.50/mile
Date	Reason for Trave	<u>el</u>			<u>Miles</u>	Amount
					Total _	
Approvals  Approval by two uninve	olved Executive Off	ficers or one uninvol	ved Executive (	Officer and a Pas	t President is red	quired.
Signature:			Signature			
President NAVP Secretary Member	CAVP ship Treasurer		st President Secretary	NAVP Membershir	CAVP Treasurer	SAVP Past Asst. Treasurer