

**Columbine Genealogical and Historical Society, Inc.
Expense Voucher**

Date: _____

From: _____

Issue Check to: _____

Address (If Required): _____

Total Amount of Disbursement: \$ _____.

Please attach all receipts & invoices for each item

	Category	Amount
Officer Expense		
President	200	\$ _____.
1st VP Programs	205	\$ _____.
2nd VP Publicity	210	\$ _____.
3rd VP Ways & Means	215	\$ _____.
Recording Secretary	220	\$ _____.
Corresponding Secretary	225	\$ _____.
Treasurer	230	\$ _____.
Newsletter Editor	235	\$ _____.
Membership	240	\$ _____.
Education	245	\$ _____.
Stationary for Officers	250	\$ _____.
Committee/Special Appointment Expense		
Archivist	300	\$ _____.
Equipment	305	\$ _____.
Historian	310	\$ _____.
Hospitality	315	\$ _____.
Mailing	320	\$ _____.
Photographer	325	\$ _____.
Public Acquisitions	330	\$ _____.
Special Projects	335	\$ _____.
Bemis Library	340	\$ _____.
Council Representative	345	\$ _____.
Web Master	350	\$ _____.
Queries	355	\$ _____.
Operating Expense		
Bank Fees	400	\$ _____.
Church Cleaning	405	\$ _____.
Society Membership Dues	410	\$ _____.
Miscellaneous	415	\$ _____.
Stern-NARA Gift Fund	420	\$ _____.
Postal Box	425	\$ _____.
State Sales Tax & Licensing Fees	430	\$ _____.
Ways & Means - Purchases	435	\$ _____.
General Fund Expense	440	\$ _____.
Symposium Expense	445	\$ _____.

Description:

For Treasurer Only

Check Number:

Date of Check:

Amount: