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ACC EXPENSE VOUCHER

Pay To: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone: \_\_\_\_\_  
For Direct Deposit: Routing #: \_\_\_\_\_ Account #: \_\_\_\_\_  
*Required only if you want the expense amount direct deposited to your bank account.*

Describe Purchases	Amount
<b>Total</b>	

Approval Date: \_\_\_\_\_

Paid by Check #: \_\_\_\_\_

Received from Petty Cash: \_\_\_\_\_

**Instructions:**

- *Tape all receipts to 8.5 x 11 sheet of paper.*
- *Write EXPENSES on envelope.*
- *Mail to:*

*John F. Martin, Jr.  
ACC Treasurer  
3487 Hardscrabble Road  
Alexandria, OH 43001-8769*

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