



**League of Women Voters Roseville Area  
Expense Payment Request**

**Date:** \_\_\_\_\_

**Make check payable to:** \_\_\_\_\_

Description/Purchased	Purpose/Team	Amount
<b>Total</b>		

**Signature:** \_\_\_\_\_

Attach receipts and other documentation to this form

<p>For office use only:</p> <p>Check # _____ Check date: _____</p>
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