

# Wilberforce University Alumni Association (WUAA) National Board VOUCHER



Official Use Only:
Date: _____
Check#: _____
Amount (\$): _____
Budget Line: _____

**PAYABLE To:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_  
*(required)*

**EMAIL Address:** \_\_\_\_\_

**CashApp, Online, PayPal, Zelle:** \_\_\_\_\_ (\$Cashtag, Email *or* US mobile#)  
*(Please circle and type/include ONE electronic payment option above)*

Committee: \_\_\_\_\_ Subcommittee/Event/Activity: \_\_\_\_\_

Reimbursement: \$ \_\_\_\_\_ *(Board members payments)*  
**Electronic Payment Request:** \_\_Yes\_\_No *(MUST select type above)*  
 Receipt(s) Attached: \_\_Yes\_\_No  
 If no, please specify reason:  
 \_\_\_\_\_

Advance: \$ \_\_\_\_\_ *(Funds MUST be accounted for/reimbursed in 30-days)*  
**Electronic Payment Request:** \_\_Yes\_\_No *(MUST select type above)*  
 Documentation Attached: \_\_Yes\_\_No  
 If no, please specify reason:  
 \_\_\_\_\_

Vendor Payment Request: \$ \_\_\_\_\_ *(Invoice payments)*  
**Electronic Payment Request:** \_\_Yes\_\_No *(MUST select type above)*  
 Documentation Attached: \_\_Yes\_\_No  
 If no, please specify reason:  
 \_\_\_\_\_

COMMITTEE/EXPENSE TYPE	AMOUNT
Awards & Recognition	\$
Events	\$
Fees & Payments	\$
Fundraising	\$
Postage & Mailings	\$
Printing	\$
Membership	\$
National Conference	\$
Recruitment/Campus Life	\$
Scholarship	\$
Supplies & Materials	\$
Technology/Communications	\$
Travel	\$
Venue/Catering/Food	\$
Young Alumni	\$
Other:	\$
<b>TOTAL REQUEST</b>	<b>\$</b>

Committee Chair (**Print**): \_\_\_\_\_ (**Signature**): \_\_\_\_\_ Date: \_\_\_\_\_

President (**Signature**): \_\_\_\_\_ Date: \_\_\_\_\_

Treasurer (**Signature**): \_\_\_\_\_ Date: \_\_\_\_\_

**Detailed Explanation** *(required)*: \_\_\_\_\_

**MUST attach/include ALL receipts and any additional supporting documentation here for ALL expenses:**