



Name \_\_\_\_\_  
 VFW Card # \_\_\_\_\_  
 Street \_\_\_\_\_  
 City \_\_\_\_\_

Veterans of Foreign Wars  
of Ohio Charities

Agent VFW Post # \_\_\_\_\_

Event Expenses to School of Instruction

Approved By \_\_\_\_\_  
 Date Approved \_\_\_\_\_

Treasurer use only	
Account Number	
Account Number	
Account Number	
Date	
Check Number	

Date	Description	Amount
	Attended VFWOC School of Instruction	
	Number of nights _____ x \$100.00 (See # 3 below) <span style="float: right;"><b>SUBTOTAL</b></span>	
	Check one: _____ Mid-Winter _____ State Convention	
	_____ July C of A _____ Board of Directors meeting	
	Roundtrip mileage to attend VFWOC School of Instruction	
	Miles x .14 cents <span style="float: right;"><b>SUBTOTAL</b></span>	
	<b>TOTAL</b>	

In accordance with the Veterans of Foreign Wars of Ohio Charities Operations Policy (see page 10) to be reimbursed for attending a VFWOC school of instruction you must:

1. Enter name, VFW card number, & address at top **(One voucher per member)**
2. To be reimbursed for housing you must enclose a hotel bill **in your name** for the number of nights.
3. You may be reimbursed by your own post's VFWOC funds for **a maximum of \$100.00 per night**

**Maximum** number of reimbursable nights

**State Convention - 4 nights, C of A - 2 nights, Mid-Winter - 3 nights**

**Board of Directors meeting - 1 night ( when signed in at meeting)**

**No** other extra charges such as taxes, meals or parking are to be submitted

4. To be reimbursed for mileage, calculate roundtrip mileage times **.14 cents**

**THIS VOUCHER AND HOTEL RECEIPT ARE TO BE SUBMITTED.**