



PNW/ASI Reimbursement Voucher

Date: _____

Payee: _____

Address: _____

Committee (if any): _____

Description: Amount

Total: _____

Attach Receipts to this voucher

For PNW/ASI Treasurer's use only:

Treas. Init.	Date Pd	Ck#
<i>Project</i>	<i>Category</i>	<i>Amount</i>

Mail to: Erica Caridio, PNW/ASI Treasurer
33686 Row River Rd
Cottage Grove, OR 97424
541-228-4556
erica@lastwordindexing.com



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