

Minnesota Association of Agricultural Educators

EXPENSE VOUCHER
2018-2019 GENERAL FUND

Check # _____

Date Pd _____

Name: _____ Date: _____
 Address: _____ Phone : (_____) _____ - _____
 _____ Region & Office : _____

In Account With:

Minnesota Association of Agriculture Educators (MAAE)
 Eric Sawatzke
 MAAE Treasurer
 4852 Reardon Ave SW Suite 1600
 Cokato, MN 55321
 Phone: 320-286-4100 (ext. 1878)
 E-mail: Eric.Sawatzke@dc.k12.mn.us

Please check the proper expense budget category:

- | | | |
|---|---|--|
| <input type="checkbox"/> Officer Expense | <input type="checkbox"/> Awards | <input type="checkbox"/> Misc. |
| <input type="checkbox"/> Director Expense | <input type="checkbox"/> Ag in the Classroom | <input type="checkbox"/> The Council |
| <input type="checkbox"/> NAAE Travel | <input type="checkbox"/> Ag In Action | <input type="checkbox"/> Gifts & Memorials |
| <input type="checkbox"/> NAAE Reg. III | <input type="checkbox"/> High Tech Conference | <input type="checkbox"/> Ag Ed Magazine |
| <input type="checkbox"/> Committee Expense | <input type="checkbox"/> Travel OYM NAAE | <input type="checkbox"/> Other (explain) |
| <input type="checkbox"/> Travel OYM Reg III | <input type="checkbox"/> Agri Growth Council | |
| <input type="checkbox"/> Summer Conference | <input type="checkbox"/> Consultant Fees | |

Please attach invoices, bills, & statements, etc...

Date	Description/Budget Category	Pd to Whom	Unit	Total

I declare under the penalties of law that this account, claim, or demand is just, correct, and that no part of it has been paid.

Signed: _____

Date: _____