

# Washington State Society of Medical Assistants

## PAYMENT VOUCHER

Date of Voucher: \_\_\_\_\_

Committee/Position charged with expense: \_\_\_\_\_

Amount of expense \$ \_\_\_\_\_

Amount donated (if any) \$ \_\_\_\_\_

Amount submitted for payment \$ \_\_\_\_\_

Check made payable to: \_\_\_\_\_

Purchase/expense description and comments \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature of Committee Chairperson/Position

**PLEASE ATTACH DOCUMENTATION/RECEIPTS TO THIS VOUCHER**

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### FOR TREASURER'S USE

Within Budget Limit      YES                  NO  
Approved by Board      YES                  NO                  Date: \_\_\_\_\_

Treasurer's Comments \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Date Paid

\_\_\_\_\_  
Check Number

\_\_\_\_\_  
Treasurer's Signature

## How do I fill out that payment voucher form?

As a committee chair, you may need to spend some money on copies, postage, travel, etc. In order to be reimbursed you will need to fill out a payment voucher and submit to the treasurer. Attached is a blank payment voucher for your use.

Here are a few general guidelines:

- According to the Bylaws and/or Standing Rules, your expense must be submitted to the treasurer within 21 days.
- The committee chair of the committee being charged for the expense must sign the voucher. (If delegate to national, the delegate signs the voucher).
- Be sure to indicate any amount you paid that you wish to donate to the state society.
- Include some description of the expense so the treasurer can determine that it is valid.
- **Attach original receipts (you keep a copy)** – please do not highlight anything as it causes the ink to fade.

Should you have any questions regarding what is and isn't a valid expense for your committee, please feel free to contact me either by phone at (509) 979-4505 or via email at [doreenhoch@hotmail.com](mailto:doreenhoch@hotmail.com).

Mail payment voucher to WSSMA Treasurer:

Doreen Hoch CMA (AAMA)  
3525 W Staley Rd  
Deer Park, Wa 99006