

Submitted By: \_\_\_\_\_

**NSDCA Expense Voucher**

Form XIII Rev 03/07

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**National Square Dance Campers Assoc., Inc.**

Ph \_\_\_\_\_ Email \_\_\_\_\_

**P. O. Box 628433**

Chapter # \_\_\_\_\_ Chapter Name: \_\_\_\_\_

Middleton, WI 53562-8433



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Position \_\_\_\_\_ Report Date \_\_\_\_\_

## NSDCA EXPENSE VOUCHER

Item	Date	DESCRIPTION of EXPENSES for Printing, Postage, Phone Call etc.	Amount	Cumulative
01				
02				
03				
04				
05				
06				
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08				
09				
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11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
<b>PLEASE ATTACH RECEIPTS FOR EXPENSE</b>			<b>Total</b>	<b>\$</b>