

**2025-26 Georgia District Anchor**

**EXPENSE VOUCHER**

**EV#:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**FROM:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

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LIST AUTHORIZED EXPENSES TO BE PAID OR REIMBURSED BY THE DISTRICT  
(ATTACH RECEIPTS & INVOICES WHERE APPLICABLE)

Expense  
Code #  
(By Governor)

**DESCRIPTION**

**TOTAL**

Check Payable to:

Signatures:

SUBMITTED BY: \_\_\_\_\_ TOTAL AMOUNT: \_\_\_\_\_

GOVERNOR: \_\_\_\_\_ DATE: \_\_\_\_\_

ANCHOR COORDINATOR: \_\_\_\_\_ DATE: \_\_\_\_\_

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**TREASURER'S RECORD**

Amount Paid: \$ \_\_\_\_\_ Check #: \_\_\_\_\_

Account #: \_\_\_\_\_ Date: \_\_\_\_\_

Remarks:

THIS FORM MAY BE DUPLICATED  
SEND COMPLETED FORM TO GEORGIA DISTRICT TREASURER  
Avaline Adams, Treasurer  
Georgia District Pilot  
4940 Hwy. 145  
Carnesville, GA 30521