

**PROJECT 2014**  
**EXPENSE VOUCHER**

Pay To: \_\_\_\_\_

Address: \_\_\_\_\_

Amount: \_\_\_\_\_

Purpose: \_\_\_\_\_

Budget Line Item: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Phone: \_\_\_\_\_

***PLEASE ATTACH***

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Treasurer's Use: \_\_\_\_\_

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

Treasurer Signature: \_\_\_\_\_ Check# \_\_\_\_\_

**Please mail to:**

Kyle Lauricella  
4 Weeburn Lane  
Wilton, CT 06897