



**We Serve**

**5SW EXPENSE VOUCHER**

**2021 – 2022**

Submit to:

Lion Ken Wetz  
P.O. Box 204  
Newell, SD 57760

Phone: 605-490-0565  
Email: [kenw@sdplains.com](mailto:kenw@sdplains.com)

Name: \_\_\_\_\_(print)\_\_\_\_\_ Signature \_\_\_\_\_

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

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

The claimant assumes that this voucher is a correct claim for reimbursement from District 5 SW.

DATE	REASON FOR EXPENSE	AMOUNT

Please attach receipts to voucher, if appropriate. Total Claim: \_\_\_\_\_

To be approved by:

Ken Wetz, 5 SW District Treasurer \_\_\_\_\_

Geraldine Ray, 5 SW DG \_\_\_\_\_

Date Paid: \_\_\_\_\_ Check No. \_\_\_\_\_ Amount: \_\_\_\_\_