



Sooke  
Teachers'  
Association

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LSA EXPENSE VOUCHER INSTRUCTIONS

1. Complete Expense Voucher Form.
2. **STAPLE receipts to the back**, left-hand corner of the completed form.
3. Submit to the STA Office for processing.

**LSA REIMBURSEMENT FORM**

**Please PRINT in ink.**

Date: \_\_\_\_\_ Name of Local Specialist Association: \_\_\_\_\_

Name: \_\_\_\_\_ Position on LSA: \_\_\_\_\_ Signature: \_\_\_\_\_

Name: \_\_\_\_\_ Position on LSA: \_\_\_\_\_ Signature: \_\_\_\_\_

Please make cheque payable to: \_\_\_\_\_

Worksite: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

My Receipts are attached

No.	Date of Expense:	Specify Expense:	Amount
1.			
2.			
3.			
4.			
		TOTAL EXPENSES	

*For Pro-D Committee Use Only*

Date Received: \_\_\_\_\_

Journal Entry No. \_\_\_\_\_

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

Cheque No. \_\_\_\_\_

Pro-D Chair Approval: \_\_\_\_\_

Pro-D Committee Approval: \_\_\_\_\_

Charge to Account Number: \_\_\_\_\_

Amount Remaining: \$ \_\_\_\_\_