

(Please attach full-side RECEIPTS ON THE BACK)



Comments

EXPENSE INVOICE

Name, first name

ORIGINAL	Committee and Event
RECEIPTS	(budgetary item)
HERE	Purpose
LEASE ATTACH FULL-SIDE	
RECEIPTS ON THE BACK)	Total amount in CHF
NLY ATTACH MULTIPLE	Date on receipt(s)
RECEIPTS	
F THEY HAVE THE SAME	Today's date
DATE.	
DIFFERENT DATE	Signature of money receiver
Different	Signature of board member
EXPENSE INVOICE	Paid with VIS PostCard
omments	
Money not yet received. Name, address and IBAN:	