

## West Virginia Wing Voucher

Paid To: _____	Address: _____
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Item #	CAP Vehicle/Aircraft ID #	Description/Purpose	Quantity	Unit Price	Cost
<b>Total</b>					

Submitted by: \_\_\_\_\_  
 Approved By: \_\_\_\_\_  
 Paid: \_\_\_\_\_  
 Check No: \_\_\_\_\_  
 No. Attach: \_\_\_\_\_

\_\_\_\_\_  
 Name (Wing Finance Officer)      Rank

WVF 173-2      July 2003  
 OPR/FM

**THIS FORM SUPERSEDES ALL PREVIOUS FORMS**