

EXPENSE REPORT

Name:			
Address:			
City, State, Zip:			
Phone:			
This form is required for reimbursement when received with receipts for payments made by authorized members.			
Expenses must be authorized by an elected Officer or by prior Board approval.			
For reimbursement, please send a copy of this completed form, with receipts, to the current club Treasurer whose			
address is listed on the current club roster. A check will be mailed to the Name/Address specified above.			
DATE OF EXPENSE	PAID TO	EXPLANATION OF EXPENSE	AMOUNT PAID
		Total Due =	
Wagon Masters:	Suggested expense not more that	an \$15.00 per rig.	
Outing Location:		Outing Date:	
Number of Rigs:	Amount Spent per Rig:		
Authorized by:			
Paid by:	Name	Date	
	Check #	Date	Name