

EXPENSE REPORT

Name: _____

Position: _____

Date: _____

Item #1 _____ \$ _____
purpose _____

Item #2: _____ \$ _____
purpose _____

Item #3: _____ \$ _____
purpose _____

Item #4: _____ \$ _____
purpose _____

Item #5: _____ \$ _____
purpose _____

add additional items as necessary

TOTAL EXPENSES \$ _____

Less Advance from Intergroup \$ _____

Total amount owed to Intergroup (if any) \$ _____

TOTAL AMOUNT DUE FROM INTERGROUP \$ _____

****** NO REIMBURSEMENTS WILL BE GIVEN WITHOUT RECEIPTS ******

Check #: _____ Budget Category or Categories _____