

**RECORD OF EXPENSES**

*Please attach all receipts*

DATE \_\_\_\_\_

NAME \_\_\_\_\_

<u>AMOUNT</u>	<u>FOR</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

TOTAL OF BILLS SUBMITTED \_\_\_\_\_

***APPROVED BY (audit committee):***

\_\_\_\_\_  
\_\_\_\_\_  
*Please attach all receipts*

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