

EXPENSE REPORT

Name	<input style="width: 95%;" type="text"/>	Period Covered	<input style="width: 95%;" type="text"/>
Address	<input style="width: 95%;" type="text"/>	Program/School	<input style="width: 95%;" type="text"/>
City, State Zip	<input style="width: 95%;" type="text"/>	Delivery of Check	<input style="width: 95%;" type="text"/>
Preferred Email	<input style="width: 95%;" type="text"/>		
Preferred Phone	<input style="width: 95%;" type="text"/>		

All expenses Require Receipts

	Account Description	Acct #	Grants	Date	Vendor	Description of Goods	Amount
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
	Total						

*Descriptions for travel are required to include city & state going to as well as purpose
 Descriptions for meals are required to include the names of all people eating
 Descriptions for client entertainment are required to include date, purpose and client (donor) names*

Employee Signature

Date

Approver's Name

Date

Approver's Signature

EXPENSE REPORT

Name	John Doe	Period Covered	Jun 16-30, 2009
Address	102 Florida Street	Program/School	Pointe Coupee
City, State Zip	Baton Rouge, LA 70801	Delivery of Check	Address on Form
Preferred Email	johndoe@advancebatonrouge.org		
Preferred Phone	555-555-5555		

All expenses Require Receipts

Account Description	Acct #	Grants	Date	Vendor	Description of Goods	Amount
1 Classroom Supplies	110611	No grant	5/18/2008	Joe's Stationary	Colored Paper	12.99
2 Library Books	225641	No grant	5/20/2008	You Read It.com	Books for students	25.75
3 Professional Development OTPS	223325	No grant	5/25/2008	Ma's Po Boys	Dinner with Leslie Smith and Donald White to discuss math program	35.00
4 Enter Account Title		No grant				
5 Enter Account Title		No grant				
6 Enter Account Title		No grant				
7 Enter Account Title		No grant				
8 Enter Account Title		No grant				
9 Enter Account Title		No grant				
10 Enter Account Title		No grant				
11 Enter Account Title		No grant				
12 Enter Account Title		No grant				
13 Enter Account Title		No grant				
14 Enter Account Title		No grant				
15 Enter Account Title		No grant				
Total						73.74

*Descriptions for travel are required to include city & state going to as well as purpose
 Descriptions for meals are required to include the names of all people eating
 Descriptions for client entertainment are required to include date, purpose and client (donor) names*

OK TO SEND

Employee Signature

Date

Approver's Name

Approver's Signature

Date

FINAL CHECK

Please make sure to submit all of the items below

- 1) This form with no Error Messages
- 2) Employee signature or electronic approval if emailing
- 3) Approver signature or electronic approval from the manager
- 4) All receipts taped to a standard sheet of paper with the receipts labeled to match the numbers in column A

* Last updated June 18, 2008