

Northeastern Ontario Area 84

Expense Record

For Administration Use Only
Date Paid:
Cheque No.

Date: Please Print

Name: Please Print

Position: Please Print

Purpose/Event: Please Print

Please Print

Description of Expense

Amount

Fuel/Transportation: \$

Meals: \$

Lodging: \$

Other: \$

Other: \$

Other: \$

Other: \$

Total Amount: \$

Signature:

please print your address, telephone number and email address below - thank you

Street No., P.O. Box, etc.

City, Village, etc. Postal Code:

Telephone No. Email:

Ensure that all receipts and/or invoices (or copies) for expenses claimed in this Expense Record are included with it.

Forward Expense Records to the Northeastern Ontario Area 84 Treasurer for payment. Thank you.