

EXPENSE REPORT

Warman Minor Hockey Association out of pocket expenses must be approved by the President or Vice President.

Submit this form along with the associated invoices and proof(s) of payment

Name on Cheque:_____

DATE	EXPLANATION OF EXPENSE	RECEIPT AND PROOF OF	AMOUNT
		PAYMENT ATTACHED	
		() YES () NO	
		() YES () NO	
		() YES () NO	
		() YES () NO	
		() YES () NO	
		() YES () NO	
		() YES () NO	
		() YES () NO	

TOTAL TO B	BE REIMBURSED:	

NOTE: MILEAGE IS PAID OUT AT A RATE OF .45/KM

WMHA APPROVAL

Approved By:	
Signature:	
Date:	
Cheque #	
GL Code	