EXPENSE REPORT ORANGE COUNCIL OF SKI CLUBS

Voucher #_	
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REQUESTED BY:	A	ACTIVITY		
DATE	DATE OF ACTIVITY			
CHECKS TO BE WRITTEN TO: NAME OF PERSON			AMOUNT	COUNCIL CHECK # *
		TOTAL:		
ITEMS EXPENSED: PLEASE STAPLE ALL EXPENSE R TO THIS FORM			AMOUNT:	COUNCIL CHECK # *
EXPENSE CHECK REQUEST: PAYABLE TO: ADDRESS				
AUTHORIZED BY:			-	
RECEIVED BY:			DATE: _	
	AMOUN	Т:		

• ITEMS TO BE RECORDED BY TREASURER.