



# Expense Report

Submitted by: \_\_\_\_\_

Date submitted: \_\_\_\_\_

Signature (type in name initials if emailing): \_\_\_\_\_

Date	Expense Description	Amount
Sub Total		
Cash Advanced		
TOTAL		

**NOTES:**  
Receipts must be attached for all expense more than \$25.

Send the completed form and all receipts to the SpaandanB Treasurer for reimbursement. You can mail it to "P.O. Box 64183, Sunnyvale, CA 94088" or email it to SpaandanB@SpaandanB.org.