

# NMVFO - Project Expense Report

Name: \_\_\_\_\_

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

Address: \_\_\_\_\_

\_\_\_\_\_

Phone No.: \_\_\_\_\_

\_\_\_\_\_

Project: \_\_\_\_\_

Treasurer's Use Only

Date Paid: \_\_\_\_\_

Check # \_\_\_\_\_

Date	Description	Food	Postage	Phone	Photos	Other	Total
<b>Totals</b>							

Comments/Explanations of Project Expenses: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please attach all receipts.**