3564 N. Ocean Blvd.

Fort Lauderdale, FL 33308

CONSTRUCTION EXPENSE REPORT

DATE:_____ DEPT:_____

EMPLOYEE'S NAME:_____ POSITION:_____

SUPERVISOR'S APPROVAL: _____

DATE	HOUSE #	EXPENSE #	TRUCK EXP #845	VOLUNTEER EXP #807	CONSTR EXP	OTHER EXP	TOTAL EXP
							$ -
							$ -
							$ -
							$ -
							$ -
							$ -
							$ -
							$ -
							$ -
							$ -
							$ -
							$ -
							$ -
							$ -
							$ -
							$ -
							$ -
		TOTALS:	$ -	$ -	$ -	$ -	$ -

Approved: _____ Date: _____

Susan DeYoung - Executive Director