

MIDWEST FACETERS' GUILD
EXPENSE INCOME STATEMENT

Person Submitting: _____
Address: _____
Phone: _____

EXPENSE REIMBURSEMENT REQUEST

INSTRUCTIONS: Copies of all receipts detailing expenses must be attached. Credit card receipts are not sufficient; you must have a cash register receipt or equivalent to prove expense. Expenses over \$50 must be approved by the Board.

Description of expenses: _____

Amount: _____ Board Approval Needed: ____ Yes ____ No

Treasurer to complete below this line.

Date Paid: _____ Check No.: _____

INCOME STATEMENT

INSTRUCTIONS: This form must accompany all funds turned into the Treasurer.

Income received from: _____

Total Amount: _____

Treasurer to complete below this line.

Date posted to ledger.

Send to: Barb Yost
11105 Thomas NW
Grand Rapids, MI 49534