

Fairway Golf Club

Expense Report

Your Name _____

Address _____

Cell/Home phone _____

Today's Date _____

Activity/Function _____

Date Expense Incurred	Company/Person Paid	Description of Expense	Amount Paid
Total			
Amount of Cash Advance			
Amount Due or Returned			

Your Signature _____

Financial Secretary _____

PLEASE ATTACH ALL RECEIPTS TO THIS REPORT