



Sun City Oro Valley Hiking Club

EXPENSE REPORT

Date _____

FROM: _____

(print name)

(tele no.)

(mailing address)

ITEMS:

Description

Cost

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

TOTAL _____

EXPENDITURE APPROVED BY: _____

RECEIPTS: Attach to this form.

SUBMIT: To the SCOVHC Treasurer

FOR TREASURER: Date Paid _____ Check No. _____