

**Alberta Rowing Association
EXPENSE FORM**

NAME: _____ ADDRESS: _____ _____	DATE: _____
REASON FOR EXPENSE: _____	

DATE	VENDOR	EXPENSE DESCRIPTION ***	TOTAL AMOUNT	G.S.T. AMOUNT	NET AMOUNT

*** EXPENSE DESCRIPTION Describe event plus indicate: - Mileage - Meals/Accommodation - Materials - Travel - Promotion - Other (Please Specify)	TOTAL AMOUNT – EXPENSES \$ _____	
SIGNATURE: _____	APPROVED BY: _____	

Note: Where a credit card is used, please provide the receipt as well as the credit card slip.

Mail to: Alberta Rowing Association 11759 Groat Road Edmonton, AB T5M 3K6

