Cheektowaga-Lancaster Zonta Club
Expense Report

Date: _____ Currency requested: _____
Name: _____
Zonta Title: _____
Address: _____
_____
Telephone number (home): _____ (business): _____
Purpose for expenditures: _____

Itemized list of expenditures:

Date	**Item**	**Amount**
	TOTAL	

Signature: _____

Date: _____

Approved By: _____ (name)
_____ (title)

Received by: _____
Date Rec'd: _____

Paid by: _____
Date paid: _____
Check #: _____