

**EXPENSE DISBURSEMENT FORM**

Committee/Position: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Explanation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

FOR OFFICIAL USE ONLY
Doc. # _____
Check # _____
Amount: _____
Date: _____

**EXPENSE DETAIL**

Meals ..... \_\_\_\_\_

Photocopying ..... Copies@\$..... per page \_\_\_\_\_

Postage ..... \_\_\_\_\_

Printing ..... \_\_\_\_\_

Supplies ..... \_\_\_\_\_

Other (Explain Above) ..... \_\_\_\_\_

\_\_\_\_\_

TOTAL AMOUNT DUE: \$ \_\_\_\_\_

Sign below and attach appropriate receipts:

\_\_\_\_\_  
Name Date

\_\_\_\_\_  
Approved By Date

Return Form To:

NLA/NEMA Conference Treasurer

Great Library

Street Address

City, State, Zip

Phone  
email