Morningside Area Community Council

Expense Report

NAME: _____ TITLE:_____ DATE:_____

ADDRESS: _____ CITY: _____ ST: _____ ZIP: _____

PO Box 40313
Pittsburgh, PA 15201

EXPENSE DATE	DESCRIPTION/PURPOSE	Beautification	Communications	Community Development	Event*	Housing	Membership	Public Safety	Other	TOTALS
TOTALS:										

I verify that the above is a correct itemization of expenses incurred by me for the Morningside Area Community Council

SIGNATURE: _____

APPROVAL: _____ DATE: _____ CHECK #: _____

* Events include: Movie Night, Community Day, Halloween, Christmas, Easter, Yard Sale, etc.

ATTACH RECEIPTS

Expense reports missing receipts OR where expenses are misclassified OR where column and row totals do not sum correctly WILL NOT BE REIMBURSED until corrected.