

**Kenosha County Association for
Home & Community Education**

Expense Form

Date: _____

Submitted by: _____

Committee: _____

EXPENSES SUBMITTED:

Speaker Honorarium:	\$ _____
Meals:	\$ _____
Supplies / Decorations:	\$ _____
Mileage: District Meeting*: _____ miles @ <u>30¢</u>	\$ _____
Other Mileage: (for board approved events): _____ miles @ <u>30¢</u>	\$ _____
Other: _____	\$ _____

* If you drove to District meeting, list riders: _____

TOTAL AMOUNT: \$ _____

Check payable to: _____

Address: _____

City, State, Zip: _____

Mail to: Current Association Treasurer. Allow 2 weeks for processing and mailing.

All expenses need to be in to the County Treasurer before the 15th of December of current year, as books need to be closed for auditing.

Approved by _____ Date: _____

Check paid on _____

Check # _____

- General Account
 Education/Service Account