HYC Expense Form

Members can print and fill out this form as an alternative to the online expense form. Copies of receipts must be attached to the form and it must be approved by the appropriate CoM member to be submitted to the Treasurer for reimbursement.

Date: DD/MM/YY	YY		
First name:	Last name:		
Phone number:	Email:		
How would you like to receive payment?	E-transfer	☐ Chequ	e
If e-transfer – ensure the email address provious bank requires a security question, the answer		hich the mone	y should be sent. If you
Description of expense	Subtotal	HST	Total
TOTA	ALS		
CoM member who should approve this ex (Commodore, Vice Commodore, Rear Commodore Director, Communications Director)			
To be completed by authorizing Co	oM member		
Name:	Date:		DD/MM/YYYY
Signature:			
Budget account:			
Refer to the budget to identify the account		pe allocated to	
To be completed by the Treasurer			
Name:			
Received:DD/MN	///YYYY Paid:		DD/MM/YYYY

