

COOPER CITY CYCLONES
EXPENSE REPORT – Parents Association

Please use this form to submit receipts for any expenses incurred on behalf of the Cooper City Cyclones Parents Board. Please attach receipts to bottom of form or on additional sheets as necessary (please use 8 ½ x 11 paper). If you have any questions, please contact Marcie Martine on 954-648-1533 or via email at mmartine@att.net.

DATE: _____ **NAME:** _____

EXPENSE TYPE (Event, supplies, etc.): _____

DESCRIPTION OF EXPENSE:

Total Amount(\$): _____

Please check one: Apply to Escrow Issue Check

SIGNATURE: _____

----- **RECEIPTS** -----

Please staple or tape
your receipts in this
section

For Treasurer Use Only:

Approved: Y N Date Paid: _____ Escrow Check#: _____

Remarks: _____