Statement number:	3

Expense Statement

Employee information

Name	Barbara Mcdonald	Department	CEO
Employee ID	Barbara Mcdonald_#3	Manager	
Position	4640 Taylorsville Rd, Louisville, Kentucky 402		

Pay period

From	
To	

Date	Account	Description	Hotel	Transport	Fuel	Meals	Phone	Entertain.	Misc.	TOTAL
			$ 100.00	$ -	$ -	$ -	$ -	$ -	$ -	$ -
										-
										-
										-
										-
										-
										-
										-
										-
										-
			$ 100.00	**$ -**	**$ -**	**$ -**	**$ -**	**$ -**	**$ -**	

Subtotal	$ -
Advances	
TOTAL	$ -

Approved by	Notes

For Office Use Only