

Expense Statement

Employee information

Name Betty Lawson Department IT Department
 Employee ID Betty Lawson #9 Manager _____
 Position 2703 Richmond Rd, Lexington, Kentucky 4050

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

