



# EXPENSE AND AFTER-ACTION REPORT

**Attach receipts and submit this form to the Treasurer**

Activity \_\_\_\_\_ Date \_\_\_\_\_

Coordinators(s) \_\_\_\_\_

Volunteers \_\_\_\_\_

Expenses (describe item) Amount

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**Signature**

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Date

Send reimbursement check to:

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**If this was a class, fill out top with the activity and volunteers**

**Fill in the following and make a copy**

**Send one copy with receipts to the Treasurer**

**Attach the list of attendees to the other copy and mail to the Vice President**

Number of attendees \_\_\_\_ (attach list)  
No. extra kits sold

Money received for class \_\_\_\_\_  
Money received for kits \_\_\_\_\_

Total received

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## Less expenses

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## 2000 expenses

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# PROFIT

## FROM \_\_\_\_\_

Send form and sign-up sheet to Vice President	Send form, money, and receipts to Treasurer
Sarah Baxter 144 Happy Landing Maple, NC 27956	Shirley Murphy 5657 Fitztown Rd. Virginia Beach, VA 23457