



**GODERICH MINOR HOCKEY INC.
EXPENSE FORM**

(ie. Training, executive expenses, supplies etc.)

****NOTE:** Any expense claim over \$300 needs prior executive approval

NAME: _____

ADDRESS: _____

DATE SUBMITTED: _____

DATE of EXPENSE	EXPENSE ITEM	COST
TOTAL CLAIMED		\$

TOTAL AMOUNT TO BE PAID: _____

AUTHORIZED BY: _____

DATE PAID: _____