

# THE NEW SCHOOL

## Expense Form

Please attach a receipt for all claimed items, noting the appropriate category, as below. Enter the total amount on this sheet.

Name:

Signature:

Date:

CATEGORY	DETAILS	\$
Advertising/Marketing	_____	
Field Trip	_____	
Office Supplies	_____	
Computers	_____	
Equipment	_____	
Fundraising	_____	
Gifts (Memory Boxes)	_____	
Postage	_____	
Miscellaneous	_____	
Travel/Ent (Student Lunch)	_____	
Repairs/Maintenance	_____	
Program Consumables:		
Art Supplies	_____	
Books	_____	
Copying	_____	
Other	_____	
Science Supplies	_____	
Snacks	_____	

TOTAL:

Approval (signature Administrator/Treasurer):

Date: