MAIN STREET WASHINGTON

Expense Report **Name:** _____

Date: _____

DATE	PURPOSE/DESCRIPTION	----------EXPENSES----------				
		Miles	Mileage @.585	Meals & Fun	Misc. Expenses	TOTAL
	TOTALS	0				

In-kind expense yes ☐ No ☐

Signed: _____ Date: _____

Approved: _____ Date: _____