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| **All expenditures of the Society MUST be accompanied by this form completely and clearly filled out, with receipts attached and signed by the appropriate MBS Chairperson or Officer.**  |

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| **Committee -** (Select 1 Committee per Form) |
| [ ]  Auction | [ ]  Intermediates Class | [ ]  Raffle |
| [ ]  Bonsai Basics Class | [ ]  Library | [ ]  Social Event - Banquet |
| [ ]  Bonsai Professional Workshop | [ ]  Membership | [ ]  Social Event – Picnic |
| [ ]  Fundamentals Class | [ ]  Mother’s Day Exhibit | [ ]  State Fair Exhibit |
| [ ]  General Fund (President) | [ ]  Novice Workshop | [ ]  Treasurer |
| [ ]  General Meetings | [ ]  Publications | [ ]  Website/Newsletter |

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| **☞Expense Category** (required – enter in the table below) |
| Books/Magazines/DVDs | Insurance | Prizes | Subscriptions |
| Entertainment | Other | Rental – Equipment | Supplies/Materials |
| Equipment/Tools | Postage/Shipping | Rental – Space | Tickets |
| Fees - Processing | Pots | Service Charges | Travel/Parking |
| Food/Refreshments | Presenter/Master Fees | Software/Web Fees | Trees/Plants (Inc. Shipping) |
| Guest Meals | Printing/Copying | Soil | Wire |

Request Date: **\_\_\_\_\_\_\_\_\_\_\_**

To whom the check should be issued: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Address to mail the check: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Committee Chair Authorizing Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**☞Provide complete listing of each item by Purchase Category and amount claimed. Use additional forms if needed.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Item #** | **Vendor** | **Item Purchased** | **☞Expense Category (required)** | **Receipt****(Y/N)** | **$ Amount** |
| **1** |  |  |  |  |  |
| **2** |  |  |  |  |  |
| **3** |  |  |  |  |  |
| **4** |  |  |  |  |  |
| **5** |  |  |  |  |  |
| **6** |  |  |  |  |  |
| **7** |  |  |  |  |  |
| **8** |  |  |  |  |  |
|  |  |  |

**Group all expenses for a given Expense Category on one line.**