



**MEAN BUSINESS**

# the Maine federation

of Business and Professional Women's Clubs

NAME \_\_\_\_\_

ITEMIZED STATEMENT OF EXPENSES  
*Budget Available to Spend Only as Income Allows*  
Please prorate requests throughout the year

Budget Line Number: \_\_\_\_\_  
Expenses through: \_\_\_\_\_

  

State Budget Category: \_\_\_\_\_  
Annual Budget Available: \_\_\_\_\_

  

Date	Explanation/Category	Amount	Total Category
	<i>Registration fees:</i>		
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	<input type="text"/>
	<i>Meals and lodging:</i>		
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	<input type="text"/>
	<i>Transportation: (Mileage at \$.10 per mile)</i>		
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	<input type="text"/>
	<i>Other:</i>		
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	<input type="text"/>
	<b>Total Budget Category:</b>		<input type="text"/>
	<i>Postage and supplies</i> <i>Budget line 20</i>		<input type="text"/>
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	<input type="text"/>

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

State Finance Chair Initials: \_\_\_\_\_  
State Treasurer Initials: \_\_\_\_\_

Date: \_\_\_\_\_  
Date: \_\_\_\_\_

\*\*\* Please submit receipts to substantiate all requests for reimbursement \*\*\*