

# Zorra Caledonian Society

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

Expenses For: \_\_\_\_\_

Payable To: \_\_\_\_\_

Phone: \_\_\_\_\_

Address (1) \_\_\_\_\_

Address (2) \_\_\_\_\_

City \_\_\_\_\_

Province \_\_\_\_\_

Postal Code: \_\_\_\_\_

	Paid To:	Category: (Meeting exp., road race, etc.)	Total:		HST:	Comments:
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
<b>Total</b>						

Signature \_\_\_\_\_