EXPENSE REPORT

Submitted by:_____(PLEASE PRINT)

Summary of Expence(s):

Date	Amount	Description	Purchased from	Receipt Number	Category	Reimbursement
					GENERAL	NO
					GENERAL	NO
					GENERAL	NO
					GENERAL	NO
					GENERAL	NO
					GENERAL	NO
					GENERAL	NO
					GENERAL	NO
					GENERAL	NO
TOTAL	$0.00					

Summary of Deposit(s):

Date	Amount	Deposit Description
TOTAL	$0.00	

ORIGINAL RECEIPTS MUST BE STAPLED TO EXPENSE REPORT!!

By signing this expense report, I am stating that all items listed are correct to the best of my knowledge.

_____

SIGNATURE

UTE PASS SADDLE CLUB
P.O. Box 9005, Woodland Park, CO 80866