## 2020-2021 Expense Report

## Music Teachers Association of California – Long Beach Branch

Name		-	Date	
Addres	ss	-	Phone Nu	mber
City	State		_	
	Expense Description/Purpose		Date	Amount
1.				
2.				
3.				
4.				
5.				
				Total:
	Complete Form, attac	n original rece	ipts to the <u>u<b>ppe</b>r</u>	right corner and send to:
	Becky Mauss 4183 Teresa Ave. Cypress, CA 90630			
	You will receive a che	ck within 10 da	ays of the receipt	of the form and receipts.
	Amount	Check	No.	Date