

## WPDA EXPENSE FORM

Requested by:	
Date to be Paid:	
Mail Check to:	
Address:	
OR: Paid On-Line	
EXPENSE FOR: (For example: Education, Banquet, Jun	nior Team)
Reason:	
Pre-Approval Requested/Received?	Dates:
Check to be made Payable to:	
Total Amount Requested:	
Approved by Committee Chair:	
PLEASE ATTACH ALL RECEIPTS TO THIS REQUEST	AND MAIL TO:
Barbara Wozniak 102 Crystal Springs Drive Cranberry Township, PA 16066	
For Treasurer Use Only	
Check # Date:	
Amount of Check: Expensed Acco	unt: