



Alcoholics Anonymous General Service Committee of Eastern Massachusetts

EXPENSE RECORD FORM

Date of Request:	
Name and Phone #:	
Committee/Budget Account Name:	
Make Check Payable To:	

Is this check for an advance?

If **Yes**,

Fill in amount requested..... \$ _____

(Please submit receipts to the Treasurer to apply against this advance balance.)

If **No**,

Please complete the form below and attach receipts (Note: Only complete the form below if this is NOT an advance.)

Date of Expense	Printing	Postage	Rent	Travel	Literature	Conventions	Supplies	Misc.	Treasurer's Use Only Account #	Description	Amount
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

Treasurer's Use Only Check Date: _____ Check #: _____ Notes: _____ Total: _____

Mail Completed Form To: General Service Committee of Eastern MA, P.O. Box 51411, Boston MA 02205-1411
 OR email form and scans of receipts to treasurer@aaemass.org
 OR feel free to hand to me at Assemblies and Monthly Area Meetings
 Thank you, Jenny T.