

## EXPENSE REPORT

**MEADOWVALE ISLAMIC CENTRE**

6508 Winston Churchill Blvd.

Mississauga, ON L5N 2W4

[WWW.MICI.ORG](http://WWW.MICI.ORG)

[TEL: 905-824-2604](tel:905-824-2604)

REPORT NO.

DATE

ORIGINATOR

COMMITTEE

**NOTE: NO CASH CAN BE AUTHORIZED UNLESS THIS FORM IS APPROVED BY THE BOARD/TRUSTEES.**

**DESCRIPTION OF GOODS OR SERVICES /PERFORMED**

**AMOUNT REQUESTED**

### SUPPLIER'S CONTACT INFORMATION.

NAME OF THE SUPPLIER:

ADDRESS:

TELEPHONE NUMBER

FACSIMILE

E-MAIL:

GST REGISTRATION NO/ SIN NUMBER

### CLAIMANT CERTIFICATION

I CERTIFY THAT THE INFORMATION PROVIDED IN THIS EXPENSE REPORT IS TRUE BEST OF MY MY KNOWLEDGE AND ABILITY. I AM CRA REGISTERED INDEPENDENT CONTRACTOR AND RESPONSIBLE TO TO PAY TAXES AND REPORT INCOME TO CANADA REVENUE AGENCY.

SUPPLIER'S SIGNATURE:

DATE

### JUSTIFICATION FOR USING THIS METHOD

ORIGINATOR'S SIGNATURE:

DATE

### FINANCE COMMITTEE COMMENTS

TREASURER'S REMARKS:

SIGNATURE OF TREASURER:

DATE

### PRESIDENT'S APPROVAL REQUEST

PRESIDENT'S REMARKS:

SIGNATURE OF PRESIDENT

DATE

### TRUSTEE'S APPROVAL REQUEST

TRUSTEE'S REMARKS:

SIGNATURE OF TRUSTEE:

DATE

SIGNATURE OF TRUSTEE:

DATE

**DISTRIBUTION: ORIGINAL TO FINANCE COMMITTEE, CC: TRUSTEE AND ORIGINATOR**

MICI FORM: 808