

CORPORATE CARD EXPENSE

Kappa Kappa Psi & Tau Beta Sigma Corporate Credit Card Expense Report

Name:		<input type="checkbox"/> KKΨ	<input type="checkbox"/> TBΣ	Begin Date:		
Notes:					End Date:	
Charge To:	<input type="text"/> <input style="width: 20px;" type="button" value="▼"/> <input type="text"/> <input style="width: 20px;" type="button" value="▼"/>					

Use this form for reporting Fraternity/Sorority Corporate Card Charges Only!

Date	Vendor	Purpose	Amount

Signature:		Total Expenses:	\$	-
Date:	1/17/17			
Address:			Notes:	

Please submit a separate report & all receipts for each major event within 30 days.

Send to Kappa Kappa Psi & Tau Beta Sigma NHQ, P.O. Box 849, Stillwater, OK 74076-0849 / hqna@kkytbs.org

N/A

TBS-Other

TBS-National Council

TBS-Counselor Travel

TBS-Board of Trustees

TBS-Alumni Association

NXD-Travel

NHQ-Travel

NHQ-Expense

KKY-Other

KKY-National Council

KKY-Leadership Funds

KKY-Governor Travel

KKY-CFR Expense

KKY-Board of Trustees

KKY-Alumni Association