SmartDoc TECHNOLOGIES

EXPENSES

1 BACKGROUND INFORMATION

First Name	Last Name	SmartDoc Client	Client Name (please type if, "Other")

Week Of:

Client Code

Notes

Approval: _____ Date: _____

2 EXPENSES

	Receipt	Date	Description	Category	Cost	# of	Total
Delete	Yes						

Add Another

Sub Total	
Less Cash Advance	
TOTAL	