Mail completed form to:

LSR PCA Treasurer
701 N. Post Oak, #450
Houston, TX 77024

Note: Forms and attachments may be submitted electronically to treasurer@lsrpca.com

LONE STAR REGION- PCA EXPENSE ACCOUNT

For the month of: _____

Name: _____

Note: Attach all receipts _____

Date Submitted: _____

				Admin Use only
Date	Paid to (Payee!Vendor Narne)	Description and Purpose (what it's for)	$Amount	Category
		Total Expenses:	0	
		Less Advances:		
		Balance Due:	0	

Notes:

Signature:

	Admin Use Only
Received:	
Date Paid:	
Check#:	
Posted:	

Mail check for reimbursement to:

Name: _____

Address: _____

City, State ZIP: _____