Statement number:	14
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Expense Statement

	ormation

 Name
 Edward Thompson
 Department IT Training

 Employee ID
 Edward Thompson_#14
 Manager

 Position
 1003 S Main St, Centerville, Ohio 45458 Unite

Pay period
From
To

Date	Account	Description	Hotel	Trans	sport	Fuel	M	eals	Ph	one	Ent	ertain.	Misc.		TOTAL	_
			\$ 100.00	\$	-	\$ -	\$	-	\$	-	\$	-	\$	- \$		-
																-
																-
																-
																-
																-
																-
																-
																-
			\$ 100.00	\$	-	\$ -	\$	-	\$	-	\$	-	\$ 	-		

Subtotal \$ Advances
TOTAL \$ -

Approved by	Notes	

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