

SmartForms TECHNOLOGIES

EXPENSES

1**BACKGROUND INFORMATION**

First Name	Last Name	SmartDoc Client	Client Name (please type if, "Other")
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Week Of:

Client Code

Notes

Approval: _____ Date: _____

2**EXPENSES**

Receipt	Date	Description	Category	Cost	# of	Total
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Sub Total

Less Cash Advance

TOTAL