

# Monthly Expenditure Form

Albany County Fire District #1

This form is to be submitted by the 2nd Wednesday of EACH month to show all previous month's VFD checks/debit card expenditures. All back up material (receipts/invoices/ credit card statements/etc) should be attached and submitted with this form.

**VFD Name:**

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*Expenses for the Month of :*

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Line 1: Vendor Name Line 2: Description of Expenditures Line 3: Check #	Pre-Approval (PA-XXX)	Amount Spent	Amount Requested
<b>TOTAL AMOUNT SUBMITTED</b>		-	-