# STATEMENT OF EXPENSE FORM

**Committees**

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| Date | Committee | Purchases Made by: |

1. Please discuss any expenditures with the Committee Chair before purchasing
2. Ensure **only** OLT expenses are on the receipt
3. Attach receipts to this form and email both to president@ottawalittletheatre.com

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| **Item** | **HST as shown on Bill** | **Total Amount of Bill** |
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| Total |  |  |

**TO BE COMPLETED BY COMMITTEE CHAIR**

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| **APROVED BY:**  **AMT PAID**  $ |

January 2024