



Expense Notice

Number _____

*Expense date _____



*Submitted by _____

Budget Line

**Approved by _____

Materials/Royalties _____

Sets _____

Costumes _____

Lighting _____

Props _____

Sound _____

Sales Tax _____

Honoraria _____

Venue Fees _____

Programs _____

Publicity _____

Reh/SM supplies _____

Hair/Makeup _____

Tickets _____

Music Supplies _____

Transportation _____

House Supplies _____

Photography _____

Contingency _____

*Total: _____

*Description

*Vendor _____

Use *one* box to tell us how to process.

Commitment for later payment

Pay on invoice

Specific pay date _____

Request for reimbursement

Pay now

Pay at show close

Notice of charge to OSHP

Notice of in-kind donation

Date received by producer _____

Producer approval signature _____

Date received by OSHP treasurer _____

Date reimbursed or paid _____

Check number _____

Please staple your receipt, charge slip, or other documentation to the back of the form.

Only one receipt per form.

* Required entry

** Only required if submitter is not responsible for the budget line.