

**Club Crabtowne, Inc.**  
**Adjustments to Expenses**

<b>Title:</b>	<b>Report Date:</b>
<b>Date(s):</b>	<b>Phone:</b>
<b>Leader:</b>	<b>e-mail:</b>

**1. Additional Expense** (also enter each, with bills or receipts on the Expense Report)

Description of Expense (to whom, for what)	Date Board Approved	Amount
<b>Total Additional Expenses</b>		

**2. Vendor Refunds** (include any refunds received for comps not included in the Trip Proposal)

Description of Expense / Vendor Name (attach documentation)	Date	Amount Paid
<b>Total Vendor Refunds</b>		

**3. Additional Comps** (comps given that were not in the original Trip Proposal)

Name of Recipient / Function	Date Board Approved	refund / no payment	Value of Comp
<b>Total Value of Comps</b> (should not exceed total on Line 1. above)			

**4. Total**

Line 1. – Line 2. (OK to be negative!) Enter here and on Line 6a. or 6b. of the Final Report	
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<b>Treasurer Use Only</b> Date Received:	Date Completed:	
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