

Huntington Beach Community Association

PO Box 474
Centerport, NY 11721



HBCA EXPENSE VOUCHER

Payee/Member Information

Name: _____

Mailing Address: _____

Phone: _____

Email: _____

Vendor Information (required to pay vendor directly or provide check for vendor)

Name: _____

Mailing Address: _____

Phone: _____

Expense Item(s) Information:

Note: All Receipts/Invoices Must Be Attached

Description of Items Purchased: _____

Paid by: Cash, Check or Credit Card (reimburse me)

Charged/Invoiced to HBCA vendor account (pay vendor)

Budget Category: (please separate and describe items for each category)

Administration _____ \$ _____

Boating _____ \$ _____

Buildings & Grounds:

B&G Expense _____ \$ _____

B&G Capital Imprvt _____ \$ _____

Fundraisers:

Spring Sale _____ \$ _____

T-Shirts/Gear _____ \$ _____

Sweepstakes _____ \$ _____

Publications _____ \$ _____

Social Event (name→) _____ \$ _____

Summer Rec. _____ \$ _____

Water Safety _____ \$ _____

Other... _____ \$ _____

Total: \$ _____