



NROTC USC Alumni League Expense Request

Purpose of Expense: _____	Tracking #
Name: _____	(entered by Finance)
Street Address: _____	
City, State, Zip: _____	

Acct No.	Date	Description	Total
Entered by FINANCE			
Total Due:			\$0.00

Claimant Signature: _____

Approved By: _____

Receipts must be attached to the Expense Form