

ASSOCIATION OF SOUTH CENTRAL OKLAHOMA GOVERNMENTS
CENA BUDGET AND EXPENDITURE REPORT

Name of Contract Recipient: _____

Preparer's Name: _____

Program Activity	Current Expenditures	Y-T-D Expenditures	Budget	Remaining Balance
Operations				

- Receipts or other documentation to support this request must be attached.
- Claims must be submitted by the 10th of the month following the expense.
- Final expenditure report must be submitted by July 10.

Signature of Authorized Official Date