

Milwaukee Youth Sports Authority  
**Grant Expense Tracking Form**

Organization: \_\_\_\_\_

Grant begins: \_\_\_\_\_

Grant ends: \_\_\_\_\_

Project: \_\_\_\_\_

Purchase Number	Date	Amount	Check Number	To	For	Itemized invoice?	Proof of Payment?
1							
2							
3							
4							
5							
6							
7							
8							
9							
0							
1							
2							
3							
4							
5							
6							
7							
8							
9							
0							













