

Business Expense Reimbursement

Company Name: Madison County
 Employee Name: Patricia B. Truesdale
 Department: Elections

Expense Period

From	To

Date	Description	Category	Amount Paid
12-22-23	Brother Stamp - Dist 2	603	21.39
"	Name Badge - Anthony Denton	603	27.37
"	Name Badge - Barbara Glass	603	27.37
Subtotal:			
Advance Payment:			
Total Reimbursement:			

Employee Signature: Pat Truesdale

Date: 1-8-24

Approval Signature: _____

Date: _____

Notes:

powered by _____

Don't forget to attach receipts

**Office DEPOT
OfficeMax**

Madison - (601) 898-8854
12/22/2023 2:48 PM



VTTY5AP4454BX6FB

SALE 2761-4-9977-908500-23.11.2
512845 STAMP,BROTHER, 19.99 S
Subtotal: 19.99
Sales and Use Tax 1.40

Order Management Invoice # 3474255550018
Approval Code: 493354

114318 JDA GMILL ORDE 54.74 E
Total: 76.13
Discover Card 3366: 76.13

AUTH CODE 02205P
TDS Chip Read
AID A0000001523010 Discover Credit
TVR 0000008000
CVS No Signature Required

Shop online at www.officedepot.com

WE WANT TO HEAR FROM YOU!
Visit survey.officedepot.com
and enter the survey code below
J6MD JBPF DVS4
or scan the below QR code



Pat Innesdale
Office Supplies

ORDERED 2 Name Badges
1- Barbara Cross \$27.37
2- Anthony Denton \$27.37

w/magnetic back

Plus - self-inking Stamp 21.39
District 2
76.13

Approved for Payment
Pat Innesdale
TOTAL: