



**2024 WCR Lake Pointe**  
**Expense Detail Form**

<b>Name:</b>	<b>Office:</b>
<b>Purpose:</b>	<b>Committee:</b>
<b>Date:</b>	

<u>Explanation / Detail of Expense</u>	<u>Amount:</u>
<b>Total Spent</b>	_____

**Please submit form with receipts to:**

**Christina Maciejewski, Lake Pointe Treasurer**  
**17901 Hall Rd**  
**Macomb Twp, MI 48044**  
**ccmac@simplehl.com**

**For Internal Purposes:**

**Date Paid:** \_\_\_\_\_ **Check#** \_\_\_\_\_