

**NONRECURRING CHARGE COST JUSTIFICATION**

Type of Charge: Returned Check Fee

1. Field Expense:

A. Materials (Itemize)

_____	\$ _____
_____	_____
_____	_____

B. Labor (Time and Wage)

_____	_____
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**Total Field Expense** \$ 0.00

2. Clerical and Office Expense

A. Supplies

\$ \_\_\_\_\_

B. Labor

\_\_\_\_\_

**Total Clerical and Office Expense** \$ 0.00

3. Miscellaneous Expense

A. Transportation

\$ \_\_\_\_\_

B. Other (Itemize)

<u>Returned Check Fee Charged by Bank</u>	<u>\$16.00</u>
_____	_____
_____	_____

**Total Miscellaneous Expense** \$ 16.00

**Total Nonrecurring Charge Expense** \$ 16.00