

## STATEMENT FOR REIMBURSEMENT OF BILLS

(Please attach original bill or receipt)

YOUR NAME \_\_\_\_\_

DATE OF PURCHASE \_\_\_\_\_

LOCATION PURCHASED \_\_\_\_\_

FOR: (Cruise, luncheon, newsletter, etc)

\_\_\_\_\_

ITEMS: \_\_\_\_\_ AMOUNT: \_\_\_\_\_

ITEMS: \_\_\_\_\_ AMOUNT: \_\_\_\_\_

ITEMS: \_\_\_\_\_ AMOUNT: \_\_\_\_\_

ITEMS: \_\_\_\_\_ AMOUNT: \_\_\_\_\_

**TOTAL AMOUNT:** \_\_\_\_\_

Note: Please itemize the above for bookkeeping breakdown.

All bills over \$25. Should be submitted to the Treasurer within 2 weeks of the expenditure.

Authorized by \_\_\_\_\_