



EXPENSE REIMBURSEMENT REQUEST FORM

Instructions: complete one or more forms per event or purpose. Do not combine events or purposes in the same form. For the AMOUNT column, enter only amounts; do not include "\$" or any other characters. Fill the form out in Acrobat or another PDF reader, not your web browser. Save the PDF and submit by email to the Treasurer along with scanned or photographed receipts.

Event or purpose:

Total: \$

Name: _____ Mailing address: _____

Date:

Payment requested by: Zelle check other (explain in email)

Email address for Zelle:

Signature: