Mountain View Skating Club

Reimbursement Request / Donation

Name: _____

Date:_____

Please list all individual items and attach receipts below

For Treasurer Use Only
Total Amount $_____
Reimbursement Check # _____
Check date _____
Date cleared_____

- ☐ **Reimbursement Requested**
- ☐ **Donation to club**

DATE	ITEM DISCRIPTION	REFERENCE – EVENT OR REASON FOR PURCHASE	TOTAL AMOUNT
Example 04/02/2018	Paint, glue, wood	Props for Spring Show	$30.00