



Reimbursement Info – *for Treasurer's Use only*

Date \_\_\_\_\_

Check No. \_\_\_\_\_

Amount \_\_\_\_\_

Initials \_\_\_\_\_

## REIMBURSEMENT FORM

(Please print legibly or you won't be reimbursed)

Date: \_\_\_\_\_

Member Name: \_\_\_\_\_

Member Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### **GUILD EXPENSE** – Use this section for *GUILD EXPENSES ONLY!*

Total Amount Due: \_\_\_\_\_ Committee: \_\_\_\_\_

Purpose: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ORIGINAL RECEIPTS MUST BE ATTACHED – Please staple to this form.

Member Signature: \_\_\_\_\_

President's Signature: \_\_\_\_\_

### **SHOW EXPENSE** – Use this section for *SHOW EXPENSES ONLY!*

Total Amount Due: \_\_\_\_\_ Committee: \_\_\_\_\_

Purpose: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ORIGINAL RECEIPTS MUST BE ATTACHED – Please staple to this form.

Member Signature: \_\_\_\_\_

Show Chairperson's Signature: \_\_\_\_\_

***If show expense, please turn in this form with the original receipt AND a copy of both.***