

Newcomers - Encore Club of the Conejo Valley, Inc. (NEC)

Reimbursement Request Form

Name & Phone Number _____

Committee Name & Budget Number _____

Event Description & Date _____

Dollars per Budget Category:

- 1. Postage _____
- 2. Printing _____
- 3. Supplies _____
- 4. Lunches _____
- 5. Permits / Fees _____
- 6. Miscellaneous _____

Total of above items: _____

Signature

Signature

Sign on the above line. Two signatures are now required.

Attach receipts to this form and turn in to the treasurer.

Receipts are required for reimbursement.

Requests for reimbursement should be made within 48 hours of the event.

Date Paid _____

Check # _____