

Pleasant View R-VI Community Club

Misc. Reimbursement Form

Requestor's Name: _____ Date: _____

<u>Itemized Expenses:</u>	<u>\$ Amount</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

****Please attach all receipts** **Total Expenses:** _____

Event/Activity:: _____

Date(s): _____

Grade(s): _____

Mailing Address (if it applies)

Check Payable to: _____

Special instructions or notes:

Signature: _____

For Community Club use only

Receipts _____ Date paid: _____ Check #: _____ \$ Amount: _____

Included in CC Annual Budget? Yes or No OR Approved at Monthly Meeting ___/___/___