

KITTATINNY LODGE 5

EXPENSE REIMBURSEMENT FORM

This form is for budgeted items only
Non-budgeted items must receive Executive Committee approval before expenditure

QUANTITY	ITEM & DESCRIPTION	COST EACH	TOTAL
GRAND TOTAL			

Attach receipts for above budgeted items here:

ATTACH
RECEIPTS
HERE

REIMBURSEMENT PAYABLE TO	
Name:	
Address:	
City, St Zip:	
Phone:	
APPLY CHARGES TO	
Committee Name:	
Date Submitted:	
APPROVED BY	
Committee Chairman:	Date:
Lodge Treasurer:	Date:
Lodge Staff Advisor:	Date: