

**Newcomers Club of Greater Park City
Reimbursement Request for 2017 / 2018**

DATE: _____

EXPENSE AMOUNT: \$ _____

CHECK PAYABLE TO: _____

PURPOSE: _____

SIGNATURE: _____

Please attach your receipt to this signed form and give it to the Treasurer to receive reimbursement.

(Treasurer's use only)

DATE PAID: _____

CHECK #: _____

CHECK AMOUNT: \$ _____

BUDGET CATEGORY: _____