

NEWCOMERS CLUB OF GREATER PARK CITY REQUEST FOR REIMBURSEMENT / PAYMENT

DATE: _____

PAYMENT AMOUNT: \$ _____

MAKE CHECK PAYABLE TO: _____

Mailing Address: _____

Purpose/Category of Expenditure: _____

List Items: _____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

TOTAL \$ _____

SIGNATURE: _____

ATTACH RECEIPT(S) TO THIS SIGNED FORM AND GIVE TO TREASURER

FOR TREASURER'S USE:

- Monthly Operating Expenditure within Budget
 Self-sustaining Activity
 Board-approved Expenditure – Date Approved _____

Date Posted

Date Paid	Check Number	Check Amount

Budget Category	Amount