

EXPENSE REIMBURSEMENT FORM

Activity: _____

	<u>Description of Expenditures</u>	<u>Amount</u>
1.	_____	\$ _____
2.	_____	\$ _____
3.	_____	\$ _____
4.	_____	\$ _____
5.	_____	\$ _____
6.	_____	\$ _____
TOTAL EXPENSE		\$ _____

Amount to Credit to student Individual Account \$ _____

Student Name: _____

REIMBURSEMENT CLAIMED \$ _____

Submitted by/Make check payable to: _____

Signature: _____ Date: _____

Attach all Receipts to this form.

FOR RIM CLUB TREASURER USE:

- Approved Budget Item
- Executive Board Approved Expenditure

<u>Check Number</u>	<u>Category</u>	<u>Amount</u>	<u>Other</u>

President or 1st Vice President's Signature: _____ Date _____

RIM Disbursement Form

Check No: _____

Date: _____

Amount: _____

Requested By: _____

Payable To: _____

Invoice No: _____

Group:

Regiment: _____

Drum Line: _____

Pageantry: _____

Disbursement Type:

Fundraiser: _____

Clinician: _____

Competition Fee: _____

Uniforms: _____

Performance: _____

Instruments & Repairs: _____

Equipment: _____

Apparel: _____

Transportation: _____

Other: _____

Comments: _____

Treasurer's Signature: _____

Board Member Signature: _____

Receipt Attached: Yes ___ No ___