

To receive a refund, reimbursement, or to have a bill directly paid to a vendor:

Fill out this form and attach all receipts, invoices, or proof of purchase

Return to the Co-President's file or return to one of the co-presidents for approval

1. Date: \_\_\_\_\_

2. Name of person making request: \_\_\_\_\_ Position: \_\_\_\_\_

3. Email: \_\_\_\_\_

4. Phone: \_\_\_\_\_

5. Circle Type of Payment: Reimbursement or Refund or Direct bill payment to a vendor

6. Expenses (attach all receipts or invoices)

Date	Description: Item purchased, purpose of expenditure, budget category if known)	Amount
Grand Total		

7. Check Info:

a. Check: Pay to the order of: \_\_\_\_\_

b. Instructions for receiving check (circle one and fill out pertinent information)

Return to file folder labeled as: \_\_\_\_\_

or

Mail to this address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

or

Other instructions: \_\_\_\_\_

8. Signature of person making request: \_\_\_\_\_ Date: \_\_\_\_\_

For Aqua Bear Use Only:

President Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Check #: \_\_\_\_\_ Check Amount: \_\_\_\_\_

Budget Category/Amount: \_\_\_\_\_ Budget Category/Amount: \_\_\_\_\_

Date check disbursed: \_\_\_\_\_