

AVWGRC REIMBURSEMENT FORM

Fill out the form below completely. All receipts should be attached to the form and emailed to milesyam@sbcglobal.net and AVRCGrapevine@gmail.com

Date _____

Event/Item(s) _____

Submitted by _____

Phone _____

Email _____

Send Check to (name) _____

Address _____

City/State/Zip _____

Description of Purchase(s)	Amount
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
Total	_____

Treasurer Use Only		
Check Number _____	Amount _____	Date _____
Budget Category _____		



Submitter please sign here: