

# Troop 4 Reimbursement Request

Date: \_\_\_\_\_

Date Paid: \_\_\_\_\_

Name: \_\_\_\_\_

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

<b>Expenditure Details</b>		
<b>Date</b>	<b>Brief Description</b> <small>(example: campout food, tent equipment, or park permit)</small>	<b>Amount</b>
<b>Total Amount Requested</b>		

<b>TROOP POLICIES AND NOTES</b>
<ul style="list-style-type: none"> <li>Don't forget to attach the Store Receipts (or copies)</li> <li>If you have private purchases on your receipt, please scratch them off before adding up what needs to be reimbursed. The Total Amount should add up to the total of all Store Receipts minus private purchases.</li> <li>Expenditures over \$50 require Troop Committee approval in advance of the purchase.</li> <li>Please try to submit requests within 45 days of making the expenditure.</li> </ul>