

Grants Pass Garden Club
Reimbursement Request

PLEASE CASH YOUR CHECK WITHIN 45 DAYS OF CHECK DATE

INSTRUCTIONS:

Please keep purchases for the GPGC on separate receipts from your personal purchases so the receipt for reimbursement shows only those for GPGC.

Please submit a separate Reimbursement Request form for EACH category when purchasing for multiple categories. The Chairperson/Director who oversees the category must approve the Reimbursement Request **prior to submitting your request** to the club Treasurer.

Following the guidelines above, please complete the requested information below. Attach the receipt or invoice to each request form, obtain approval from the category Chairperson/Director, and submit the completed request to the Club Treasurer.

Requester: _____ Date: _____

Make Check Payable to: _____
(if different than requester)

Description/Explanation	\$ Amount	Category Acct. #
TOTAL REIMBURSEMENT REQUESTED:	\$	

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Committee Chairperson/Director approval signature & Date

Recvd _____ ***FINANCE DEPT. Use Only***
Date Paid: _____ Delivered: _____
Check #: _____ Ck Amount: _____
Check #: _____ Ck Amount: _____
Posted: _____ ***COMMENTS:***

File:

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