

Attach receipts here
in back

Reimbursement

Committee: _____

(chair signature) (date)

Used for: _____
(project/event)

Amount:

\$

Chairperson send to:

Rough and Tumble Historical Association
P.O. Box 56
PARKESBURG, PA 19365

Pay to:

(name)

(address [if first time this year])

(City, State Zip)

phone number :

90

Instructions:

- 1 Fill out & sign the front of this form
- 2 Attach receipts (or an explanation)
- 3 Place in window envelope with address showing

Please turn in expenses within 30 days of occurrence. Later reimbursement requests may result in 4 weeks delay.

Send to Committee chairperson:

Name

Address

City, State

Receipt from:

\$ Amount

date

date	Receipt from:	\$ Amount
.....	_____	_____
.....	_____	_____
.....	_____	_____
.....	_____	_____
.....	_____	_____
.....	_____	_____

Total (amount on front)

08/21/15