

# Troop 376 Expense Reimbursement Request

Treasurer Use Only	
Date Paid	_____
Check #	_____
Camp Acct	<input type="checkbox"/>

Date \_\_\_\_\_

Reason for Expense \_\_\_\_\_  
 \_\_\_\_\_

Total Amount \_\_\_\_\_  
*(receipts must be attached)*

Budget \_\_\_\_\_

Camp Account \_\_\_\_\_  
*(scout name)*

Check \_\_\_\_\_  
*(made payable to)*

Approval <i>(need one)</i>		
Primary		
	Scoutmaster	_____
	Committee Chair	_____
Secondary		
<i>(if primary not available)</i>	Colleen Lewy	_____
	Arlo Gatchel	_____

All expense re-imbusement requests must be accompanied by this form and/or an envelope with the same information written on the outside.