

Reimbursement Form

Troop 318

Reimbursement amount \$ _____

What did you purchase? _____

What date did you purchase? _____

What event/activity was this purchased for? _____

Who approved purchase? (Circle one below)

ScoutMaster

Committee Chair

Committee Member

Signature of Approver _____

Information of person reimbursed:

Name: _____

Address: _____

Phone: _____

Email: _____

Please attach the original receipt or copy of receipt with this form and deliver them to:

Troop 318 Treasurer

NRUMC - 8501 Honeycutt Road

Raleigh, NC 27615