



**AMERICAN LEGION AUXILIARY UNIT 1038
EXPENSE REIMBURSEMENT FORM**

ALL RECEIPTS MUST BE ATTACHED TO THIS FORM!

REQUEST DATE:	
NAME:	
ZELLE DETAILS:	
OR CHECK PAYABLE TO:	
STREET ADDRESS:	
CITY, STATE ZIP CODE:	
PHONE NUMBER:	

EVENT:	
EVENT DATE(S):	
BENEFICIARY**:	
PROGRAM TYPE**:	

ITEMIZED LIST OF RECEIPTS:

PURCHASE DATE	ITEM PURCHASED	PURCHASED FROM	AMOUNT
TOTAL			0

*Beneficiary Key	1. Deployed Active-duty Military	5. Recently Discharged Veterans
	2. Military Servicemember	6. Local Veterans or Legionnaires
	3. Military Families	7. Students K-12
	4. Hospitalized Veterans	

**Program Type Key	1. Americanism	11. Legislature
	2. Auxiliary Emergency Fund	12. Membership
	3. Chaplain	13. National Security
	4. Children and Youth	14. Past Presidents Parley
	5. Community Service	15. Poppy & Poppy Poster Contest
	6. Education	16. Public Relations
	7. Empire Girls State	17. Service to Veterans
	8. Historian	18. VA & R
	9. Junior Activities	19. Warrior Family Assistance
	10. Leadership	

For Treasurer Use Only
Date of Payment:
Amount:
Check Number (if applicable):