

EXPENSE REIMBURSEMENT

Please <u>submit requests as soon as possible after purchase</u> up to September 1. Expenses incurred after September 1 should be submitted immediately so that the Finance Committee has the information by November 1 for budget purposes. Expenses in November and December can still be applied to the current year's budget but should only be for items needed in the current year.

Pay to Vendor		Reimbursement			Directed Donation		
Pay to:							
Address:							
City:			State:		Zip:		
SUBMITTED BY							
Name:					Date:		
Phone:			Email:				
Garden or Project Name:							
Chairperson Print Name & Sign:							
Co-signer (required if requesting reimbursement to yourself):							
LIST EXPENSES AND INCLUDE ORIGINAL RECEIPTS					S	AMOUNT	
						\$	
						\$	
						\$	
						\$	
						\$	
						\$	
TOTAL DUE:					DUE:	\$	

SUBMIT COMPLETED REQUEST TO:

Recurring Charge

Ellen Grissom, Treasurer SEWMG, Inc. 8220 South 13th Street Oak Creek, WI 53154

Treasurer Use Only				
Check Amount:	\$			
Check Number:				
Credit Card:				
EFT Payment:				
Date Paid:				