



2021 EXPENSE REIMBURSEMENT REQUEST

DATE:

NAME:

AMOUNT:

EVENT/PURPOSE:

Please note all expense requests must include receipts and must be submitted within 14 days of event (10 days for the Holiday Party). Financial Secretary will confirm funds were allocated in budget and President will approve reimbursement. President Elect must approve expenses by Chapter President.

Budget Approved By:

Date: _____

Reimbursement Approved By:

Date: _____

If you wish to have a check mailed please provide address:

For questions, please contact the Treasurer Joe Stanley at Phone: 248-408-1125

Fax: 844-206-6572 or Email joseph.stanley@citizensbank.com