

SVCC Reimbursement Form Cover Sheet

<p>Tape Original Receipt here (do not staple),</p> <p style="text-align: center;"><u>OR</u></p> <p>For multiple receipts, attach 8 ½ x 11 sheet of paper with receipts taped to it.</p>	<p>Name: _____</p> <p>Date Submitted: _____</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 80%;">Purchase Description</th> <th style="width: 20%;">Amount (\$)</th> </tr> </thead> <tbody> <tr> <td>1)</td> <td></td> </tr> <tr> <td>2)</td> <td></td> </tr> <tr> <td>3)</td> <td></td> </tr> <tr> <td>4)</td> <td></td> </tr> <tr> <td>5)</td> <td></td> </tr> <tr> <td style="text-align: right;">Total Amount =</td> <td></td> </tr> </tbody> </table> <p style="margin-top: 20px;">Expense Category (circle one): Meeting Exp / Coin Show Exp / Operational Exp</p> <p>Pre-Authorized by: _____</p> <p>Approved by: _____</p> <p>Date Approved: _____</p>	Purchase Description	Amount (\$)	1)		2)		3)		4)		5)		Total Amount =	
Purchase Description	Amount (\$)														
1)															
2)															
3)															
4)															
5)															
Total Amount =															
	<p>Date Paid: _____ Check # _____</p> <p>Completed by: _____</p>														