

LWV ABC Expense Reporting Form

* Name	
* Address	
email address	
Phone	
*Purpose of Purchase	
* Amount (if for mileage, calculate @ 0.50/mile)	
* Date of transaction	
* Attach receipt	
<p>*Description of expense: what was purchased, paid for or donated. If associated with an event or program, include some details. If necessary, attach another page.</p> <p>This can be for travel, materials, operating expenses, program expenses, etc.</p>	
* How would you like to process this?	Reimbursement to you (amount)
<i>(Enter \$ amount in one box, or split the amount)</i>	As a Payment in Kind to us (amount)
*Signature	
<p>Please attach a copy of your receipt or other document for our records, thank you. If submitting by email, either scan a copy of the receipt and email it with this form, or submit both by regular mail.</p> <p>Address: LWV ABC, 1482 - 158th Lane NW, Andover MN 55304. Email lwwabc@gmail.com</p>	
* required so that I can record this and pay you!	