Footlite Musicals, Inc. Expense Reimbursement Form

INSTRUCTIONS:

1. Please list the expenses for which you are requesting reimbursement. Be as specific as possible. Use a separate line for each type of expense.
2. Attach a receipt for each expense. If there are non-Footlite expenses on a receipt, note the Footlite portion on the receipt and transfer the total to this form.
3. We use an electronic bill-pay system. They look like rebate checks. The check will be sent to the address below. **PLEASE COMPLETE THE INFORMATION CLEARLY AND ACCURATELY.**
4. Place completed form in the Boardroom Mailbox marked Susan Smith, Treasurer

Name_____

Street_____

City_____**State**_____**Zip**_____**Phone**_____

Email Address_____

Expense Description	Amount	Show
TOTAL		

Accounting Use Only Date Paid_____ Reference_____