

**NEWCOMBERS CLUB OF HONOLULU  
REIMBURSEMENT REQUEST**

5/18/10 REV

DATE OF REQUEST

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**EXPENSE CATEGORY**

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**DESCRIPTION/PURPOSE:**

*(see below for more detail)*


**COMMITTEE CHAIR:**

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*(signature)*

**REIMBURSEMENT**

**PAYABLE TO: (your name)**

**MAILING ADDRESS**


**(ATTACH RECEIPTS)**

**ITEMIZED EXPENSES:**

DESCRIBE ITEMIZED EXPENSE	AMOUNT
	\$
	\$
	\$
	\$
	\$

**TOTAL AMOUNT PAYABLE**

\$
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<p><b>TREASURER'S USE</b></p>
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**CHECK NUMBER**

**DATE PAID**

**AMOUNT PAID**

\$