SWONT DISTRICT EXPENSE FORM

2008-2009

NAME (PLEASE PRINT) _____

I HEREBY CERTIFY THAT I HAVE INCURRED THE FOLLOWING EXPENSES IN MEETING THE RESPONSIBILITIES OF MY OFFICE AND REQUEST REIMBURSEMENT BY THE DISTRICT SECRETARY-TREASURER WITHIN THE PROVISIONS OF THE BUDGET AND AVAILABLE FUNDS.

SIGNATURE _____ DATE _____

INDICATE NATURE AND PURPOSE OF EXPENSE [ ] CLUB VISITATION REPORT ENCLOSED

ITEMS PLEASE ATTACH PAID INVOICES WHERE POSSIBLE (note: Registration is not a valid expense)	AMOUNT
	$
	$
	$
	$
	$
SUB TOTAL 'A'	$

IF REIMBURSEMENT IS FOR TRAVEL, INDICATE THE FOLLOWING:

DATE	FROM	TO	KILOMETERS	AMOUNT OR .25/km
				$
				$
				$
				$
				$
			SUBTOTAL 'B'	$
			TOTAL (ADD A TO B)	

APPROVED:

DATE _____ GOVERNORS SIGNATURE _____

TO BE COMPLETED BY SWONT DISTRICT SECRETARY-TREASURER

BUDGET ACCOUNT(S) CHARGED TO: _____ AMOUNT _____

_____ _____

_____ _____ CHEQUE NUMBER _____

DATE _____ BY _____

SIGNATURE OF DISTRICT SECRETARY-TREASURER