

LHORBA Expense Reimbursement

Name:

Address

City, State Zip

Date:

Instructions: Either print out the form or open the excel file to complete form
 Segregate expenses by activity, e.g., Picnic Location/Date, Trail Maintenance Loc/Date, etc.
 and calculate a subtotal for each activity
 Submit expense report with receipts attached within **60 days or prior to December 31st.**

Itemized Expenses

DATE	DESCRIPTION	CATEGORY	COST
EVENT:			
	Subtotal		
EVENT:			
	Subtotal		
EVENT:			
	Subtotal		
TOTAL REIMBURSEMENT			\$ -

Don't forget to attach receipts!

Signature

Mail to: Barbara Godish
 804 Sunnehanna Drive
 Johnstown, PA 15905

 Check #:
 Date: