WATERCOLOR SOCIETY OF OREGON

Request for Reimbursement

Please describe what you paid for and the event for which it was used. Use the codes on the Expense Form if you can. Please attach all documentation and/or receipts to your request. Reimbursement can not be made for undocumented expenses.

CODE	DESCRIPTION	AMOUNT

Date Paid: _____ Total request: _____

Check Number: _____

Submitted by: _____

Address: _____

_____

Phone: _____