

Walnut Creek Pony Club

Reimbursement Request Form

Make Check Payable to:

	Date: _____
	Request Submitted by: _____

Name: _____

Address: _____

City: _____

State: _____ Zip code: _____

E-mail: _____ Phone: _____

Expenses Related to Which Event:

- | | |
|---|---|
| <input type="checkbox"/> Club/Regional Meeting | <input type="checkbox"/> Club Mounted Meeting /Clinics |
| <input type="checkbox"/> Regional Rally | <input type="checkbox"/> Regional Upper Level Camp/RatingNational |
| <input type="checkbox"/> Championships | |
| <input type="checkbox"/> Other – Please describe: _____ | |

Date of Expense	Amount of Expense	Description of the Expense
TOTAL		

How to Complete an Expense Reimbursement Form:

1. Complete "Make Check Payable to" section.
2. Enter purchase details date of purchase, a brief description of what was paid for, and the total. List each item individually if you have more than one. If more room is needed, continue on separate sheet of paper.
3. Sign and date the bottom of the form. By adding your signature, you are certifying that the information you've added to the form is accurate and reflects actual business expenses that you paid for using your own funds.
4. Attach original receipts for all expenditures.
5. Submit form and all original receipts to:

WCPC Treasurer, Christine Rothe, 7078 Bittersweet Lane, Okeana, OH 45053

Signature: _____ Date: _____