



Boy Scout Troop 714

General Expense Reimbursement Form

Date Requested: _____ Total Amount of Reimbursement: \$ _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: () _____

Instructions for Completing This Form

1. Enter all of the required information above.
2. Enter the date that the expenditure occurred below.
3. Describe the reason and/or purpose of for the expense below.
4. Attach any relevant receipts, credit card statements, etc. to this form.
5. Sign and date where indicated.
6. Submit the completed form (with attachments) for review and approval.

*Please note that every field constitutes required information and must be completely filled in. If necessary, attach additional sheets. Incomplete submittals will be returned for the missing information.
If you have lost your receipt, you must also fill out the Missing Receipt Affidavit form.*

Date of Expense	Description of Expense	Expense Amount

Purchaser Signature

Date

By signing, I certify that the detail and amount shown above was expended for Boy Scout Troop 714 business purposes.

Printed Name of Purchaser

Officer Signature (Other than Treasurer)

Date

Printed Name of Officer (Other than Treasurer)