

Boy Scout Troop 297 Expense Reimbursement Form

- 1 Expense report must be completed for any disbursement of funds from the Troop 297 Treasury
- 2 Unsupported expense of greater than \$20 requires the Troop Committee Chairman's signature
- 3 To validate your claim, please submit proof of transactions.
ALWAYS OBTAIN RECEIPTS, then **attach them to your expense form** when you turn it in.
- 4 Feel free to batch your expense claims, please subtotal expenses by event.

For Treasurer Use Only

Check number:

Amount:

\$

Check date:

Date Input - Date Sent

I am requesting (check one):

Reimbursement of expenses incurred

Vendor Check for a Troop 297 vendor

Other describe below

Troop Member or Vendor

Street Address

City, State, Zip

Describe Event(s) & Expense Purpose**Receipt Amount(s)**

If questions arise, contact me at:

phone #

email

Receipt Total \$ -

No Receipt * \$

*** Troop Committee Chairman signature required for:**

- unsupported reimbursements of > \$20
- all check advances to individuals
- all direct payments to vendors

Payment direct to vendor *	\$
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Grand Total \$ -

Signature, Troop Committee Chairman - Troop 297

I provide that all expenses funds claimed are in support of the approved activities of BSA Troop 297, Roseville, MN.

PRINT Name

Signature

Date _____

Note: ATTACH ALL ORIGINAL RECEIPTS