

Pomme d'Api Expense Reimbursement Form

Receipt Number	Date (YYYY,MM,DD)	Notes/Description	Category*	Amount

*Category examples: Fundraising, XTrip, XEvent, General, Other

Submitted by (First Name, Last Name): _____

Cheque to (Address, City, Province, Postal Code): _____

OFFICE USE:

AUTHORIZED BY:

DATE:

CHEQUE AMOUNT:

PETTY CASH AMOUNT: